

STATE OF CALIFORNIA
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT

**Patient Discharge Data
File Documentation
January-December 2003**

PUBLIC VERSION

COMMA-DELIMITED TEXT FORMAT

CD-ROM

July 2004

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INTRODUCTION

Patient Discharge Data: Public Patient-Level Dataset

The California Office of Statewide Health Planning and Development (OSHPD) provide a public dataset of the Patient Discharge Database available for purchase on compact disc (CD). The data is made available by OSHPD once it has been screened by the automated reporting software and corrected by the individual hospitals. The public patient-level dataset includes patient zip code, demographic variables and clinical information

The public dataset is comprised of a record for each inpatient discharged from a licensed acute care hospital. This includes: General Acute Care Hospitals, Acute Psychiatric Hospitals, Chemical Dependency Recovery Hospitals, and Psychiatric Health Facilities. (Note: the only exceptions are records not reported by some California State Hospitals; see the State Hospitals discussion on page four.)

The patient discharge dataset is available for discharges in each calendar year. The data on CD-ROM are stored on one CD containing three zipped data files and a full set of documentation files. The discharge records are divided into three sets by the geography of the reporting hospitals. One file contains discharge records from hospitals in Los Angeles County, another file contains discharges from the seven other counties in Southern California and the third file contains discharges from hospitals in the remaining 50 Northern California Counties.

MASKED VARIABLES

To protect patient confidentiality, those records with unique combinations of a select set of demographic variables will have one or more of those variables masked to make sure the files are de-identified. Each unique record will have the minimum number of fields masked to ensure the data is longer unique. The variable masking will occur in the following order:

ORDER OF MASKING	DATA FIELDS SUBJECT TO MASKING
1 st	Age in years (at admission)
2 nd	Ethnicity
3 rd	Race
4 th	Sex
5 th	Age Category 20 (20 Age Categories)
6 th	Age Category 5 (5 Age Categories)
7 th	Small County Groups*
8 th	Admit Quarter
9 th	Patient Zip Code **
10 th	OSHPD ID
	<i>*Small counties with total populations of 30,000 or less are grouped into 3 categories: Central (CE), Northeastern (NE), and Northwestern (NW). Ten counties were grouped in 2003: Central: Alpine, Inyo, Mariposa, Mono; Northeastern: Modoc, Plumas, Sierra; Northwestern: Colusa, Glenn, and Trinity.</i>
	<i>**Five-digit zip will be masked to three-digits; if record is still unique, zip will be totally masked with an asterisk.</i>

General assistance is available by calling OSHPD's Healthcare Information Resource Center at (916) 322-2814.

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Public Discharge Dataset

Data Fields in 2003 Public Discharge Dataset	Percent Remaining Unmasked For Variables Subject to Masking
Hospital Identification Number	100.0%
Type (level) of Care	
Age in Years	54.1%
Age (20 Categories)	86.7%
Age (5 Categories)	93.3%
Sex	81.9%
Ethnicity	70.2%
Race	74.1%
Zip Code (5 digits masked to 3 digits)	98.3%
Zip Code (3 digits masked to 0 digits)	99.6%
County of Patient's Residence (or Small County Groups)	100.0%
Length of Stay	
Quarter Admitted	96.6%
Year Admitted	
Source of Admission	
Type of Admission	
Disposition of Patient	
Pre-hospital Care and Resuscitation (Do Not Resuscitate Order)	
Expected Principal Source of Payment - Payer Category	
Expected Principal Source of Payment - Type of Coverage	
Expected Principal Source of Payment - Plan Code Number	
Total Charges	
Principal External Cause of Injury (E-Code)	
Other External Cause of Injuries (up to 4 Other E-Codes)	
Major Diagnostic Category	
Diagnosis Related Group	
Principal Diagnosis	
Condition Present at Admission (for Principal Diagnosis)	
Principal Procedure	
Days from Admission to Principal Procedure	
Other Diagnoses (24 Other Diagnoses)	
Condition Present at Admission (for Other Diagnoses)	
Other Procedures (20 Other Procedures)	
Days From Admission to Other Procedures	

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IMPORTING NOTES

The fields listed below contain numeric codes, which are not numeric values; most PC software will treat these fields as numeric values unless formatted otherwise. Thus, when importing the data into your software, these fields should be formatted as text or alphanumeric to retain the leading and trailing zeros. Also, when a text variable is masked, the field value is an asterisk, which may cause errors if imported as numeric.

- OSHPD-Hospital Identification Number
- 5 Age Category and 20 Age Category Fields
- Sex
- Ethnicity
- Race
- Patient Zip Code
- County of Patient's Residence
- Admission Quarter
- Expected Principal Source of Payment – Plan Code Number
- MDC
- DRG
- **All** diagnosis code fields (principal and other)
- **All** procedure code fields (principal and other)

It is especially important that all Diagnosis and Procedure code fields be formatted as “text.” These fields are comprised of ICD-9-CM codes, some of which begin with alpha characters that cannot be read if not formatted as text. Also, many ICD-9-CM codes have leading and/or trailing zeros. For example, the ICD-9-CM code for *Salmonella Gastroenteritis* is “003.0”. If it is not formatted as text, it will appear as “3”, which is the numeric value, but is not the valid diagnostic code for *Salmonella Gastroenteritis*.

It is not absolutely essential but is recommended, to maintain leading zeros in the other codes that contain leading zeros (Hospital Identification Number, Patient's County of Residence, MDC, DRG, and Payer Plan Code Number). When these fields are formatted as “text,” the number of digits in each respective field will then remain constant. For example, Alameda County will then appear as “01”, rather than “1”, and will contain two digits like the other 2-digit county codes (Fresno through Yuba, 10 through 58, respectively).

COMMA DELIMITED DATA FORMAT

In the comma-delimited set, the length of each field and the length of each record will vary according to the data reported. To assist you in using the comma delimited patient discharge data sets, a header row identifying each data element is provided in the position of the first record.

Each data element is separated by a comma and is defined and described in this documentation. In Appendix H, there is a table listing the Field Label (used in the header row), Field Name, Field Type (format), and Maximum Number of Characters.

Fields with no data will have consecutive delimiters (commas). Most PC software will have no difficulty with consecutive delimiters. However, some software packages may handle consecutive delimiters as a single delimiter and adjustments will need to be made.

Note: It is possible for some invalid values to remain in the database “as reported” by the hospital, due to a lack of database enforced integrity. This means that for some observations, you may find blank values, invalid alpha characters in numeric fields, out-of-range numeric values, etc.

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FACILITY EXCEPTIONS

State Hospitals:

Through the first half of 1989, the database included twelve state hospitals. As of July 1989, the eleven operated by the Department of Mental Health or the Department of Developmental Services, serving mentally disordered and developmentally disabled patients, no longer report discharge data. The twelfth, the Veterans Home of California, Nelson M. Holderman Memorial Hospital, in Yountville has continued to report discharge data. Records from this hospital can be located using the Hospital Identification Number "281297."

Psychiatric Health Facilities:

Psychiatric Health Facilities, which provide care in licensed Acute Psychiatric beds, are subject to the same reporting requirements as other California hospitals. This type of hospital was first licensed in California in 1988. Patient discharge data for 1989 and for January through June 1990 included data from six Psychiatric Health Facilities; data for July through December 1990 include data from all but one of the 16 licensed Psychiatric Health Facilities. All of these facilities started reporting their patient discharge data beginning in 1991.

Modifications and Non-Compliant Facilities:

Some hospitals have applied for and been granted "modifications" to standard Patient Discharge Data reporting requirements. Other hospitals were unable to complete specific fields as required and were deemed "non-compliant" at the time of reporting. See Appendix D (Data Exceptions) for a listing of all non-compliant hospitals and those with approved modifications and their affected variables.

Formerly Freestanding Facilities on Parent Facility Licenses (Consolidated Licensure)

Beginning in the mid-1980s, via the Consolidated Licensure Act, the Department of Health Services began merging formerly separately licensed hospitals and nursing homes onto the licenses of "parent" hospitals. To become "Consolidated," certain conditions had to be met, including common ownership and medical staff, and the locations had to be within 15 miles. Beginning in the 1990s, formerly separately licensed locations (including some existing consolidated satellite locations) have been converted to "Distinct Part Facilities" that now appear on parent facilities' licenses.

Beginning with the 2003 data, OSHPD tracked both "Distinct Part Facilities" and "Consolidated Satellite" campuses the same, both as "Consolidated" Satellites. See *Appendix F, Hospital Locations*, for a listing of all patient discharge data "reporting entities." For "Consolidated" reporting entities, the "Facility Name" is plural (e.g., Medical Centers, Hospitals), and the numbers of consolidated locations are displayed. (The ZIP codes and counties noted, each belong to the Parent location. Currently, there are three sets of "Consolidations" that cross county boundaries.)

As each set of consolidated locations shares the same license, they also share the same license number. To view specific licenses, on the Internet, go to the OSHPD ALIRTS page, www.alirts.oshpd.ca.gov. At the first ALIRTS screen, enter the license number, facility name, or OSHPD_ID number in the search window and click "Search." At the next screen, click on "View License." (Also, at this screen you can click on "View Reports" to see their most recent Annual Utilization data submitted.)

The discharges reported for each single, parent, and satellite facility is unique to that location. The only merged sets of discharges are those noted as from "Consolidated Facilities."

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VARIABLE CHANGES OVER TIME

Hospital Identification Number:

The first six characters of each record contain the "Hospital Identification Number". Beginning with data reported for 1995, this former nine-digit hospital identification number was shortened to six digits. The former first digit, that indicated the type of care reported, has been made a separate data element (Type of Care) and is described below. The former filler number "06" (2nd and 3rd digits) has been dropped. Thus the hospital identification number now consists of six digits. The first two indicate the county number and the last four are unique to a facility within each county.

Type of Care:

The second field on each record is a single digit field that describes the "Type of Care" ("Level of Care" in 1995 and 1996) from which the patient was discharged. See Type of Care codes and labels on page 7.

Beginning with 1997 data, hospitals were required to report one of five Types of Care for each discharge. For the 1995 and 1996 data years, hospitals were required to assign, to each discharge, one of three Levels of Care ("3" for Long Term Care, "6" for Rehabilitation Care and "1" for all other types of care). Prior to 1995, discharges were optionally reported in sets, by one of the five Types of Care. Most hospitals chose to include all discharges, regardless of the type of care, in one set (usually acute care).

Note: there has never been a Type of Care or Level of Care code "2".

HISTORICAL SUMMARY OF FORMAT AND CONTENT CHANGES PATIENT DISCHARGE DATA COLLECTION PROGRAM	
DATA ITEM:	ACTION / EFFECTIVE DATE:
E-Code	Added - July 1990
Social Security Number	Added - July 1990
Record Linkage Number (Encrypted SSN)	Added - July 1990
Zip Code for Homeless (ZZZZZ)	Added - November 1993
Hospital Identification Number (from 9 to 6 digits)	Changed - January 1995
Level of Care (see <i>Type of Care, below</i>)	Added - January 1995
Ethnicity/Race	Changed - January 1995
Source of Admission	Expanded - January 1995
Type of Admission	Changed - January 1995
Procedure Dates (for all reported procedures)	Added - January 1995
Patient Disposition	Expanded - January 1995
Expected Source of Payment:	Changed - January 1995
	Expanded - January 1999
Principal Diagnosis-Condition Present at Admission	Added - January 1996
Other Diagnoses-Condition Present at Admission	Added - January 1996
Type of Care (formerly <i>Level of Care</i>)	Changed - January 1997
Pre-hospital Care & Resuscitation (Do Not Resuscitate Order)	Added - January 1999

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MISSING/INVALID DATA VALUES

Invalid or missing values (submitted below the error tolerance level) are defaulted to “unknown.” The table below displays default numbers and percentages.

Default Status	Numbers of Records	Percent of Records
Not Defaulted	3,967,420	99.69%
One Variable Defaulted	12,008	.30%
Multiple Variables Defaulted	197	.00%

Other data exceptions are listed by hospital in *Appendix D, Data Exceptions*.

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HOSPITAL IDENTIFICATION NUMBER

FIELD NAME : OSHPD_ID

DEFINITION : A unique six-digit identifier assigned to each facility by the Office of Statewide Health Planning and Development. The first two digits indicate the county in which the hospital is located. The last four digits are unique within each county.

CODES, CATEGORIES AND COMMENTS:

A - <u>99</u>	=	01-58 = County Codes (see Appendix A)
B - <u>9999</u>	=	0001-9999 = Unique Hospital Identifier (within county)

OSHPD Facility ID Number will be the 9th variable masked if necessary to de-identify unique patient records by replacing code with an asterisk.

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TYPE OF CARE

FIELD NAME : TYP_CARE

DEFINITION : Defined by the California Health and Safety Code, this refers to the licensure of the bed occupied by an inpatient. The types of care are documented on the official license issued by Licensing and Certification of the California State Department of Health Services.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	<u>Category</u>	<u>Licensed Bed Classification/Designation</u>
1 =	Acute Care	General Acute Care
3 =	Skilled Nursing/Intermediate Care	Skilled Nursing/Intermediate Care (a.k.a. Long Term Care)
4 =	Psychiatric Care	Acute Psychiatric Care
5 =	Chemical Dependency Recovery Care	Chemical Dependency Recovery Hospital/Service
6 =	Physical Rehabilitation Care	Rehabilitation Center, a bed designation within the General Acute Care classification.

All other values for Type of Care are not considered valid.

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AGE IN YEARS (at Admission)

FIELD NAME : AGE_YRS

DEFINITION : Age of patient at time of admission.

CODES, CATEGORIES AND COMMENTS:

Age = Blank indicates age has been masked or is unknown (the year of birth is incomplete or unknown and an age of 0 has been assigned).

Newborns are identified with a code 7 in Source of Admission or infants (less than 24 hours old) are coded with a 3 in Type of Admission.

To reduce the need for masking to protect patient confidentiality; all patients older than 85 will be coded as "85" years of age. This can be considered "85 and older."

If necessary, Age in Years will be the first variable masked to de-identify unique patient records, by blanking-out reported age. This is the only numeric data element that will be masked; all other variables subject to masking are text variables and contain an asterisk when masked.

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AGE 20 CATEGORY

FIELD NAME : AGECAT20

DEFINITION : Age range categories based on the patient's age at the time of admission.
 Twenty age categories; mostly 5-year increments.

CODES, CATEGORIES AND COMMENTS:

The following age breakdown was provided in public version B for 1999 and 2000.

CATEGORY	AGE	DEFINITION
01	under 1 year	under 1 year
02	1-4 years	366 days through 4 years
03	5-9 years	5 years through 9 years
04	10-14 years	10 years through 14 years
05	15-19 years	15 years through 19 years
06	20-24 years	20 years through 24 years
07	25-29 years	25 years through 29 years
08	30-34 years	30 years through 34 years
09	35-39 years	35 years through 39 years
10	40-44 years	40 years through 44 years
11	45-49 years	45 years through 49 years
12	50-54 years	50 years through 54 years
13	55-59 years	55 years through 59 years
14	60-64 years	60 years through 64 years
15	65-69 years	65 years through 69 years
16	70-74 years	70 years through 74 years
17	75-79 years	75 years through 79 years
18	80-84 years	80 years through 84 years
19	85 years & over	85 years or greater
00	unknown (0)	Year of birth incomplete or unknown

Age Category (20) will be the 5th variable masked if necessary to de-identify unique patient records by replacing age category code with an asterisk.

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AGE 5 CATEGORY

FIELD NAME : AGECAT5

DEFINITION : Five age categories; Random year increments.

CODES, CATEGORIES AND COMMENTS:

CATEGORY	AGE	DEFINITION
01	Under 1 year	Under 1 year
02	1-17 years	1 year through 17 years
03	18-34 years	18 years through 34 years
04	35-64 years	35years through 64 years
05	65years & over	65 years or greater
00	Unknown (0)	Year of birth incomplete or unknown

Age Category (5) will be the 6th variable masked if necessary to de-identify unique patient records by replacing age category code with an asterisk.

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SEX

FIELD NAME : SEX

DEFINITION : This is the gender of the patient.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	<u>Category</u>
1	Male
2	Female
3	Other
4	Unknown

All other values for Sex are not considered valid.

"Other" includes sex changes, undetermined sex, and live births with congenital abnormalities that obscure sex identification. "Unknown" indicates that the patient's sex was not available from the medical record.

Sex (gender of the patient) will be the 4th variable masked if necessary to de-identify unique patient records by replacing code with an asterisk.

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ETHNICITY

FIELD NAME : ETHNCTY

DEFINITION : This code indicates whether or not the patient's ethnicity is Hispanic.

CODES, CATEGORIES AND COMMENTS:

The single code digit indicates ethnicity and includes:

<u>Code</u>	<u>Category</u>
1	Hispanic
2	Non-Hispanic
3	Unknown

All other values for Ethnicity are not considered valid.

Both ethnicity and race are self-reported by the patient.

Ethnicity will be the 2nd variable masked if necessary to de-identify unique patient records by replacing code with an asterisk.

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RACE

FIELD NAME : RACE

DEFINITION : This code indicates the patient's racial background.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	<u>Category</u>
1	White – A person having origins in or who identifies with any of the original Caucasian peoples of Europe, North Africa, or the Middle East.
2	Black – A person having origins in or who identifies with any of the black racial groups of Africa.
3	Native American/Eskimo/Aleut – A person having origins in or who identifies with any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.
4	Asian/Pacific Islander – A person having origins in or who identifies with any of the original oriental peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. Includes Hawaii, Laos, Vietnam, Cambodia, Hong Kong, Taiwan, China, India, Japan, Korea, the Philippine Islands, and Samoa.
5	Other – Any possible options not covered in the above categories.
6	Unknown

All other values for Race are not considered valid.

Both ethnicity and race are self-reported by the patient.

Race will be the 3rd variable masked if necessary to de-identify unique patient records by replacing code with an asterisk.

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PATIENT ZIP CODE
FIVE DIGIT / THREE DIGIT

FIELD NAME : PATZIP

DEFINITION : The ZIP Code of the patient's residence (all five digits). This is a unique code assigned to a specific geographic area by the U.S. Postal Service for the patient's usual residence.

CODES, CATEGORIES AND COMMENTS:

The five digits of the ZIP Code of the patient's residence.

If the field is coded with XXXXX, the ZIP Code is unknown.

If it is coded with YYYYY, the patient is from an area outside the United States.

If it is coded with ZZZZZ, the patient has no residence (homeless).

If the city of residence is known but not the street address, or if the first three digits are the only digits reported, then it is a partial ZIP Code. It will be shown as a 5-digit ZIP code—the first three digits plus '00'. Example: Sacramento, CA 95800. There are no partial ZIP codes in the 2001 or 2002 data.

The reported ZIP Code will be the 8th variable masked if necessary to de-identify unique patient records to protect patient confidentiality. The Patient ZIP Code can be masked sequentially from 5-digits to 3-digits, then from 3-digits to just an asterisk, if required to de-identify the record.

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COUNTY OF PATIENT'S RESIDENCE

FIELD NAME : PATCNTY

DEFINITION : The county of residence code is assigned based on the reported patient's ZIP code.

CODES, CATEGORIES AND COMMENTS:

Codes: 00-58, CE, NE and NW

01-58 indicates a county in California (see list in Appendix A); 00 indicates that the patient's zip code was unknown, outside California, outside the U.S., homeless, or partial.

The data for 2001 is the only data in which some records have a blank patient county, which indicates the patient's ZIP Code was unreported or partial.

To protect patient confidentiality, those counties with populations less than 30,000 are assigned to one of three groups of small counties to de-identify unique patient records. The groups and counties included are:

GROUP	COUNTIES
CE (Central)	Alpine, Inyo, Mariposa and Mono
NE (Northeastern)	Modoc, Plumas and Sierra
NW (Northwestern)	Colusa, Glenn and Trinity

Note – Using the reported ZIP Code, OSHPD assigns the patient's county of residence. ZIP Codes are designed for mail delivery, not to identify political boundaries. Therefore, some ZIP Codes cross county boundaries. For such ZIP Codes, OSHPD assigns the county with the greatest population in the respective ZIP Code.

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LENGTH OF STAY (Days)

FIELD NAME : LOS

DEFINITION : Total number of days from admission date to discharge date of each patient.

CODES, CATEGORIES AND COMMENTS:

The days are calculated by subtracting the Admission Date from the Discharge Date. The length of stay for patients admitted on day one and discharged on day two is counted as one day.

Patients admitted and discharged on the same day yield a calculated length of stay of "0" days. This requires changing those (same-day admits and discharges) zeros to "ones" before performing average length of stay calculations to achieve more meaningful average length of stay calculations.

The number of days is right justified and zero filled (for fixed-length data format).

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ADMISSION: QUARTER

FIELD NAME : ADM_QTR

DEFINITION : Quarter the patient was admitted to the hospital.

CODES, CATEGORIES AND COMMENTS:

	<u>Code</u>	<u>Quarter</u>
One-digit quarter	1	January-March
	2	April-June
	3	July-September
	4	October-December

Quarter admitted will be the 7th variable masked if necessary to de-identify unique patient records by replacing code with an asterisk.

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ADMISSION: YEAR

FIELD NAMES : ADM_YR

DEFINITION : Year the patient was admitted to the hospital.

CODES, CATEGORIES AND COMMENTS:

Four-digit year - This is comprised of first two digits century and last two digits year.

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SOURCE OF ADMISSION

FIELD NAME : ADM_SRC

DEFINITION : Effective with discharges on January 1, 1995, the source of admission describes three aspects of the source:

The first digit describes the site from which the patient originated.

The second digit describes the license of site from which the patient originated.

The third digit describes the route by which the patient was admitted.

CODES, CATEGORIES AND COMMENTS:

Site:

<u>Code</u>	<u>Category</u>
1	Home
2	Residential Care Facility
3	Ambulatory Surgery
4	Skilled Nursing/Intermediate Care
5	Acute Inpatient Hospital Care
6	Other Inpatient Hospital Care
7	Newborn*
8	Prison/Jail
9	Other

All other values for "Site" are not considered valid.

**"Newborn" source of admission is defined as a "baby born alive in this hospital."*

Licensure of Site:

<u>Code</u>	<u>Category</u>
1	This Hospital
2	Another Hospital
3	Not a Hospital

All other values for "Licensure of Site" are not considered valid.

Route:

<u>Code</u>	<u>Category</u>
1	<u>Your</u> ER
2	Not <u>Your</u> ER (or no ER)

All other values for "Route" are not considered valid.

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TYPE OF ADMISSION

FIELD NAME : ADM_TYPE

DEFINITION : Effective with discharges on January 1, 1995, the patient's type of admission was reported using one of the categories listed below. The critical distinction is not how but when the admission was arranged.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	<u>Category</u>
1	Scheduled (Scheduled in advance, at least of 24 hours or more prior to admission)
2	Unscheduled (Not scheduled within 24 hours or more prior to admission)
3	Infant, less than 24 hrs old
4	Unknown (Does not include stillbirths)

All other values for Type of Admission are not considered valid.

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DISPOSITION OF PATIENT

FIELD NAME : DISP

DEFINITION : The consequent arrangement or event ending a patient's stay in the reporting facility. Effective with discharges beginning January 1, 1995, the codes are as follows:

CODES, CATEGORIES AND COMMENTS:

Disposition of Patient:

<u>Code</u>	<u>Category</u>
01	Routine (Home)

Within this Hospital:

<u>Code</u>	<u>Category</u>
02	Acute Care
03	Other Care
04	Skilled Nursing/Intermediate Care

To Another Hospital:

<u>Code</u>	<u>Category</u>
05	Acute Care
06	Other Care (not Skilled Nursing/Intermediate Care)
07	Skilled Nursing/Intermediate Care
08	Residential Care Facility
09	Prison/Jail
10	Against Medical Advice
11	Died
12	Home Health Service
13	Other

All other values for Disposition are not considered valid.

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PREHOSPITAL CARE AND RESUSCITATION

FIELD NAME : DNR

DEFINITION : This code indicates whether or not there was a "Do Not Resuscitate" order upon admission or within 24 hours of admission from a physician.

CODES, CATEGORIES AND COMMENTS:

A "Do Not Resuscitate" (DNR) order is a directive from a physician in a patient's current inpatient medical record instructing that the patient is not to be resuscitated in the event of a cardiac or pulmonary arrest. In the event of a cardiac or pulmonary arrest, resuscitative measures include, but are not limited to, the following: cardiopulmonary resuscitation (CPR), intubation, defibrillation, cardioactive drugs, or assisted ventilation.

Code Category

Y = Yes - a DNR order was written at the time of or within the first 24 hours of patient's admission to the hospital.

N = No - a DNR order was not written at the time of or within the first 24 hours of the patient's admission to the hospital.

All other values for Prehospital Care and Resuscitation are not considered valid.

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EXPECTED SOURCE OF PAYMENT
PAYER CATEGORY

FIELD NAME : PAY_CAT

DEFINITION : This code indicates the category of payer (type of entity or organization) who is expected to pay or did pay the greatest share of the patient's bill.

CODES, CATEGORIES AND COMMENTS:

Expected Payer Categories			
Code	Category	Code	Category
01	Medicare	06	Other Government
02	Medi-Cal	07	Other Indigent
03	Private Coverage	08	Self Pay
04	Workers' Compensation	09	Other Payer
05	County Indigent Programs	00	Not reported or reported in error

All other values for Payer Category are not considered valid.

- **Medicare** – A federally administered third party reimbursement program authorized by Title XVIII of the Social Security Act. Includes crossovers to secondary payers.
- **Medi-Cal** – A state administered third party reimbursement program authorized by Title XIX of the Social Security Act.
- **Private Coverage** – Payment covered by private, non-profit, or commercial health plans, whether insurance or other coverage, or organizations. Included are payments by local or organized charities, such as the Cerebral Palsy Foundation, Easter Seals, March of Dimes, or Shriners.
- **Workers' Compensation** – Payment from workers' compensation insurance, government or privately sponsored.
- **County Indigent Programs** - Patients covered under Welfare and Institutions Code Section 17000. includes programs funded in whole or in part by County Medical Services Program (CMSP), California Healthcare for Indigents Program (CHIP), and/or other Realignment Funds whether or not a bill is rendered.
- **Other Government** - Any form of payment from government agencies, whether local, state, federal or foreign, except those listed above. Includes funds received through California Children Services (CCS), the Civilian Health and Medical Program of the Uniformed Services (TRICARE), and the Veterans Administration.
- **Other Indigent** – Patients receiving care pursuant to Hill-Burton obligations or who meet the standards for charity care pursuant to the hospital's established charity care policy.
- **Self Pay** – Payment directly by the patient, personal guarantor, relatives, or friends. The greatest share of patient's bill is not expected to be paid by any form of insurance or other health plan.
- **Other Payer** – Any third party payment not included above. Included are cases where no payment will be required by the facility, such as special research or courtesy patients.

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

EXPECTED SOURCE OF PAYMENT

PAYER TYPE OF COVERAGE

FIELD NAME: : PAY_TYPE

DEFINITION : This code indicates the type of coverage for the following: Medicare, Medi-Cal, Private Coverage, Workers' Compensation, County Indigent Programs, and Other Government.

CODES, CATEGORIES AND COMMENTS:

<u>Codes</u>	<u>Category</u>
1	= Managed Care - Knox-Keene/MCOHS
2	= Managed Care – Other
3	= Traditional Coverage
0	= Payer Type field is not considered applicable for payer categories other than: Medicare, Medi-Cal, Private Coverage, Worker's Compensation, County Indigent or Other Government.

All other values of Payer Type are not considered valid.

Managed Care - Knox/Keene-Medi-Cal County Organized Health System. Healthcare service plans, including Health Maintenance Organizations (HMO), licensed by the Department of Corporations under the Knox-Keene Healthcare Service Plan Act of 1975. Includes Medi-Cal County Organized Health Systems (MCOHS).

Managed Care-Other. - Healthcare plans, except those above, which provide managed care to enrollees through a panel of providers on a pre-negotiated or per diem basis, usually involving utilization review. Includes Preferred Provider Organization (PPO), Exclusive Provider Organization (EPO), Exclusive Provider Organization with Point-of-Service option (POS).

Traditional Coverage. - All other forms of healthcare coverage, including the Medicare prospective payment system, indemnity or fee-for-service plans, or other fee-for-service payers.

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

EXPECTED SOURCE OF PAYMENT

PAYER PLAN CODE

FIELD NAME: : PAY_PLAN

DEFINITION : This four-digit code number refers to the name of those plans which are licensed under the Knox-Keene Healthcare Service Plan Act of 1975 or designated as a Medi-Cal County Organized Health System (MCOHS).

CODES, CATEGORIES AND COMMENTS:

The Plan code number represents the name of the Knox-Knee licensed plan or the Medi-Cal County Organized Health System. See Appendix E for the plan code names and numbers.

If the Payer Plan Code field is not applicable, determined by Type of Coverage, the Plan Code is zero filled (i.e. assigned a value of "0000").

Only values for Payer Plan, listed in Appendix E, are considered valid.

If the plan **code numbers** are the **same** and the **plan names** are different, it means they belong to same "parent" plan.

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

TOTAL CHARGES

FIELD NAME : CHARGE

DEFINITION : Total Charges include all charges for services rendered during the length of stay for patient care at the facility, based on the hospital's full established rates.

CODES, CATEGORIES AND COMMENTS:

Charges include, but are not limited to, daily hospital services, ancillary services and any patient care services. Hospital-based physician fees are excluded. Prepayment (e.g. deposits and prepaid admissions) are not deducted from Total Charges.

If a patient's length of stay is more than 1 year (365 days), Total Charges are reported for the last year (365 days) of stay only. To calculate Adjusted Total Charges for stays over one year use the following formula:

$$(\text{Total Charges} / 365 \text{ days}) \times \text{Length of Stay} = \text{Adjusted Total Charges}$$

Total Charges are expressed in whole dollars. However, there is a specific meaning attached to the three values of "total charges," below:

Where total charges equal 1 - the "1" is a code meaning that there were no (\$0) charges generated for the hospital stay (and was verified by the hospital). All discharges from Shriner's Hospital - Southern California are coded as "1" because they do not charge their patients. Programming note - the "1" allows the aggregation of all discharges with "valid total charges" by selecting those with total charges greater than zero.

Where total charges equal 0 - the "0" is a code meaning that there was a charge, but that the amount of the charge could not be reported by the hospital. This frequently means the reported values were blank or otherwise invalid. This includes all Kaiser Foundation Hospitals which report a "0" for Total Charges as they are exempted from reporting total charges because they do not charge specifically for an inpatient stay. Rather, they receive a constant monthly (capitated) payment from each member, whether or not that member is hospitalized, or received outpatient care or no care at all.

Where total Charges equal 9999999 -The total charge of "9999999" indicates the actual charges exceed the seven digit field size utilized by the hospital or designated agent.

Note – Beginning in 2002, Shriner's Hospital - Northern California began coding all Total Charges as \$0, to note that they do not charge their patients. Unfortunately, this is inconsistent with the coding scheme. Their Total Charges now appear as invalid or missing data.

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

EXTERNAL CAUSE OF INJURY -- PRINCIPAL E-CODE

FIELD NAME : ECODE_P

DEFINITION : The external cause of injury consists of the ICD-9-CM codes E800-E999 (E-Codes), that are used to describe the external cause of injuries, poisonings, and adverse effects. If the information is available in the medical record, E-Codes sufficient to describe the external cause are reported for discharges with a principal and/or other diagnoses classified as injuries or poisonings in Chapter 17 of the ICD-9-CM (800-999), or where a code from Chapters 1-16 of the ICD-9-CM (001-799) indicates that an additional E-code is applicable. The reporting of E-Codes in the range E870-E879 (misadventures and abnormal reactions) is not required. The principal E-Code is reported only for the inpatient hospitalization during which the injury, poisoning, and/or adverse effect was first diagnosed and/or treated.

To assure uniform reporting of E-Codes, when multiple codes are required to completely classify the cause, the first (principal) E-code will describe the mechanism that resulted in the most severe injury, poisoning, or adverse effect.

CODES, CATEGORIES AND COMMENTS:

The valid E-Codes are specified in Chapter 17 of the ICD-9-CM codebook. External cause of injury was not required for discharges before July 1, 1990.

CODE STRUCTURE (examples):

Content of Field: E9068 Would be read as: E906.8

Content of Field: E899 Would be read as: E899.

(Implied decimal is read after the first four positions.)

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

EXTERNAL CAUSE OF INJURY - OTHER E-CODES

FIELD NAME : ECODE1, ECODE2, ECODE3, and ECODE4

DEFINITION : The external cause of injury consists of the ICD-9-CM codes E800-E999 (E-Codes), that are used to describe the external cause of injuries, poisonings, and adverse effects. If the information is available in the medical record, E-codes sufficient to describe the external cause are reported for discharges with a principal and/or other diagnoses classified as injuries or poisonings in Chapter 17 of the ICD-9-CM (800-999), or where a code from Chapters 1-16 of the ICD-9-CM (001-799) indicates that an additional E-code is applicable. The reporting of E-Codes in the range E870-E879 (misadventures and abnormal reactions) is not required. An E-Code is reported only for the inpatient hospitalization during which the injury, poisoning, and/or adverse effect was first diagnosed and/or treated.

If the principal E-Code does not include a description of the place of occurrence of the most severe injury, or poisoning, an additional E-Code is reported to designate the place of occurrence, if available in the medical record. Place of occurrence is coded as E849.0 - E849.9. Up to three additional E-codes will be reported, if necessary to completely describe the mechanism(s) that contributed to, or the causal events surrounding, any injury or poisoning, or adverse effect first diagnosed and/or treated during the current inpatient hospitalization.

CODES, CATEGORIES AND COMMENTS:

The valid E-Codes specified in Chapter 17 of the ICD-9-CM codebook. External cause of injury was not required for discharges before July 1, 1990.

CODE STRUCTURE (examples):

Content of Field: E9068 Would be read as: E906.8

Content of Field: E899 Would be read as: E899.

(Implied decimal is read after the first four positions.)

CALIFORNIA PATIENT DISCHARGE DATA
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MAJOR DIAGNOSTIC CATEGORY
(MDC)

FIELD NAME : MDC

DEFINITION : MDCs are mutually exclusive categories containing all possible principal diagnosis areas. The diagnoses in each MDC correspond to a single major organ system or etiology, and in general are associated with a particular medical specialty. Some MDCs are residual categories containing diseases or disorders that could not be assigned to an organ system-based MDC. OSHPD purchases the DRG Grouper software from Centers for Medicare and Medicaid Services (CMS) contractor, 3M® Health Information Systems. CMS implements revisions to the DRG Grouper software effective October 1, the start of the Federal fiscal year for the Medicare Prospective Payment System. The Office implements the same software effective with discharges from the beginning of the following calendar year. DRG Grouper Version 18.0, which was implemented by CMS on October 1, 2000, is the DRG Grouper applied to the Office's calendar year 2001 patient discharge data.

The MDC is based on the principal diagnosis. The MDC is given "00" for records where the principal diagnosis is not an existing ICD-9-CM code. Beginning with 1993 data, new codes after October 1, are "mapped" by OSHPD's own mapping logic system to the closest equivalent code recognized by the DRG Grouper Version for that calendar year and assigned to an MDC based on that DRG Grouper Version's logic.

CODES, CATEGORIES AND COMMENTS:

Codes: 00-25

MDC 00 is the label for records that could not be assigned to MDCs 1-25 by the DRG grouper (e.g. some records from DRG 470 (ungroupable)).

Appendix B displays the MDC descriptions.

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

DIAGNOSIS RELATED GROUP
(DRG)

FIELD NAME : DRG

DEFINITION : DRGs are case-mix assignments grouping hospital patients to categories based on diagnostic, therapeutic and demographic characteristics for the purpose of reimbursement. OSHPD purchases the DRG Grouper software from Centers for Medicare and Medicaid Services (CMS) contractor, 3M® Health Information Systems. CMS implements revisions to the DRG Grouper software every October 1, the start of Federal fiscal year for the Medicare Prospective Payment System. The Office implements the same software effective with discharges from the beginning of the following calendar year. Special note - New codes after October 1, are "mapped" by OSHPD's own mapping logic system to the closest equivalent code recognized by the DRG Grouper Version for that calendar year and assigned to a DRG based on that DRG Grouper Version's logic.

CODES,CATEGORIES AND COMMENTS:

Codes: 001-511

Appendix C displays the DRG descriptions.

The following indicates the DRG Grouper Version used during recent years:

Calendar Year 1995 = Version 12.0 HCFA DRG Grouper
Calendar Year 1996 = Version 13.0 HCFA DRG Grouper
Calendar Year 1997 = Version 14.0 HCFA DRG Grouper
Calendar Year 1998 = Version 15.0 HCFA DRG Grouper
Calendar Year 1999 = Version 16.0 HCFA DRG Grouper
Calendar Year 2000 = Version 17.0 HCFA DRG Grouper
Calendar Year 2001 = Version 18.0 HCFA DRG Grouper

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

PRINCIPAL DIAGNOSIS

FIELD NAME : DIAG_P

DEFINITION : The condition established, after study, to be the chief cause of the admission of the patient to the facility for care.

CODES, CATEGORIES AND COMMENTS:

The appropriate codes to be entered for this data element are specified in the International Classification of Diseases, 9th Revision, Clinical Modification, U.S. Department of Health and Human Services, Washington D.C. (ICD-9-CM).

Beginning with 1999, the psychiatric codes from the Diagnostic and Statistical Manual of Mental Disorders (DSM), by American Psychiatric Association, Washington, D.C. are not accepted by OSHPD.

Note: Morphology codes are not accepted by OSHPD. SNODO codes are not accepted by OSHPD. Codes from the Supplementary Classification of External causes (E-Code) of Injury and Poisoning are not accepted in the Principal Diagnosis field. Italicized ICD-9-CM codes are not accepted in the Principal Diagnosis field.

CODE STRUCTURE (examples):

Content of Field: V5781 Would be read as: V57.81

Content of Field: 3441 Would be read as: 344.1

(Implied decimal is read after the first three character positions.)

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

CONDITION PRESENT AT ADMISSION
(for the Principal Diagnosis)

FIELD NAME : CPOA_P

DEFINITION : The indicator for whether or not the condition was present at admission by reporting Yes, No, or Uncertain for the Principal Diagnosis.

CODES, CATEGORIES AND COMMENTS:

The indicator for the principal diagnosis is defaulted to Yes (present at admission), unless reported otherwise.

<u>Code</u>		<u>Category</u>
Y	=	Yes
N	=	No
U	=	Uncertain

All other values of Condition Present At Admission are not considered valid.

Detailed parameters for reporting Condition Present At Admission are available in the California Patient Discharge Data Reporting Manual, Third Edition.

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

PRINCIPAL PROCEDURE

FIELD NAME : PROC_P

DEFINITION : The principal procedure is one which was performed for definitive treatment rather than one performed for diagnostic or exploratory purposes, or which was necessary to take care of a complication.

The principal procedure is the procedure most related to the principal diagnosis.

If only non-therapeutic procedures were performed, then a significant non-therapeutic procedure should be reported. A significant procedure is one that is surgical in nature, or carries a procedural risk, or carries an anesthetic risk, or affects DRG assignment.

CODES, CATEGORIES AND COMMENTS:

The appropriate codes to be entered are specified in the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM), U.S. Department of Health and Human Services, Washington, D.C.

Note: HCPCS and CPT codes are not accepted by OSHPD.

CODE STRUCTURE (examples):

Content of Field: 022 Would be read as: 02.2
Content of Field: 0293 Would be read as: 02.93
(Implied decimal is read after the first two positions.)

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

DAYS FROM ADMISSION TO PRINCIPAL PROCEDURE

FIELD NAME : PROC_PDY

DEFINITION : The number of days between the patient's admission date and the date of the Principal Procedure.

CODES, CATEGORIES AND COMMENTS:

If the Principal Procedure was performed prior to admission, this numeric value will be prefixed with a minus (-) sign. The days are calculated by subtracting the date of admission from the date of the Principal Procedure. If the Principal Procedure was performed on the day of admission, the number of days will be zero. If no Principal Procedure or date is reported, the days are shown as zero. The maximum value is 9999, which means that the procedure was performed more than 9998 days after admission.

Through 2000, if no procedure was performed, the days to procedure were shown as -999. For procedures performed on the same day as admission, the days were displayed as zero.

Some hospitals report procedures performed on their inpatients, on an outpatient basis by another facility, during the patient's stay at the reporting hospital. Therefore, not all procedures reported by a hospital were necessarily performed by and at that hospital.

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

OTHER DIAGNOSES (24 Other Diagnoses)

FIELD NAME : ODIAG1 to ODIAG24

DEFINITION : Conditions that coexist at the time of admission, develop subsequently during the hospital stay, affect the treatment received, or affect the length of stay.

CODES, CATEGORIES AND COMMENTS:

Beginning with 1999, the psychiatric codes from Diagnostic and Statistical Manual of Mental Disorders (DSM), by American Psychiatric Association, Washington D.C., are not accepted by OSHPD.

The appropriate codes to be entered are specified in the International Classification of Diseases 9th Revision, Clinical Modification, U.S. Department of Health and Human Services, Washington, D.C. (ICD-9-CM).

Other Diagnoses do not include E-Codes. E-Codes are located in special E-Code fields.

Note: Morphology or SNODO codes are not accepted by OSHPD.

CODE STRUCTURE (examples):

Content of Field: V5781 Would be read as: V57.81
Content of Field: 3441 Would be read as: 344.1
(Implied decimal is read after the first three positions.)

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

CONDITION PRESENT AT ADMISSION
(for the Other Diagnoses)

FIELD NAME : CPOA1 to CPOA24

DEFINITION : The indicator for whether or not the condition was present at admission by reporting Yes, No, or Uncertain for all Other Diagnoses.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	<u>Category</u>
Y	= Yes
N	= No
U	= Uncertain

All other values of Condition Present At Admission are not considered valid.

Detailed parameters for reporting Condition Present At Admission are available in the California Patient Discharge Data Reporting Manual, Third Edition.

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

OTHER PROCEDURES
(Maximum 20)

FIELD NAME : OPROC1 to OPROC20

DEFINITION : The procedure code is reported according to the ICD-9-CM. A procedure is considered significant when it is a surgical risk, procedural risk, anesthetic risk or is needed for DRG assignment.

CODES, CATEGORIES AND COMMENTS:

The appropriate codes to be entered are specified in the International Classification of Diseases 9th Revision, Clinical Modification (ICD-9-CM), U.S. Department of Health and Human Services, Washington, D.C. All significant procedures that are surgical in nature or carry procedural risk, or carry an anesthetic risk, or affect DRG assignment, are reported.

Note: HCPCS and CPT codes are not accepted by OSHPD.

CODE STRUCTURE (examples):

Content of Field: 022 Would be read as: 02.2

Content of Field: 0293 Would be read as: 02.93

(Implied decimal is read after the first two positions.)

CALIFORNIA PATIENT DISCHARGE DATA
January-December 2003

DAYS FROM ADMISSION TO OTHER PROCEDURES

FIELD NAME : PROC DY1 to PROC DY20

DEFINITION : The number of days between the patient's admission date and the date of the Other Procedure.

CODES, CATEGORIES AND COMMENTS:

If Other Procedures were performed prior to admission, the numeric value will be prefixed with a minus (-) sign. The days are calculated by subtracting the date of admission from the date of the Other Procedure. If the Other Procedures were performed on the day of admission, the number of days will be zero. If no Other Procedures or dates are reported, the days are shown as zero. The maximum value is 9999, which means that the procedure was performed more than 9998 days after admission.

Through 2000, if no procedure was performed, the days to procedure were shown as -999. For procedures performed on the same day as admission, the days were displayed as zero.

Some hospitals report procedures performed on their inpatients, on an outpatient basis by another facility, during the patient's stay at the reporting hospital. Therefore, not all procedures reported by a hospital were necessarily performed by and at that hospital.

CALIFORNIA PATIENT DISCHARGE DATA

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APPENDICES

A full set of appendix files in a portable document format (.pdf) is included for easy viewing and printing. In addition, a subset of five appendices is duplicated in an Excel file with each appendix in an individual worksheet. These Excel worksheets can be used with relational database software to link code numbers from the data to their respective labels (e.g., the Hospital ID Number, (OSHDPD_ID), from the data set can be matched with the hospital name in Appendix F). See the tables below for appendix descriptions.

APPENDICES PDF Files		
The complete set of Appendices (PDF format) is located in the "Appendices_03" folder.		
Appendices	File Name	PDF files must be viewed/read with Adobe Acrobat Reader
A	App_A_counties.pdf	Listing of California counties (names and codes).
B	App_B_mdc.pdf	Listing of Major Diagnostic Categories (names and codes)
C	App_C_drg.pdf	Listing of Diagnosis Related Groups (names and codes)
D	App_D_exceptions.pdf	Data Exceptions (Approved Requests for Modifications and Non-Compliances)
E	App_E_plan_codes.pdf	Plan Codes for Expected Source of Payment
F	App_F_hospital_list.pdf	Listing of all hospitals in data set (Hospital ID#, Name, ZIP, Facility Level, and Total Discharges)
G	App_G_report_form.pdf	Manual Abstract Reporting Form (OSHDPD-1370)
H	App_H_data_fields.pdf	Data Fields, comma delimited format, public set
I	App_I_masked_field_freqs.pdf	Frequencies, by Value, of Fields Subject to Masking

APPENDICES SUBSET Excel File		
A duplicate, sub-set of Appendices (in MS-Excel format) is also located in the "Appendices_03" folder. The worksheets in this file can be used as relational database tables to link codes with labels		
Appendices	Worksheet Name	Description
A	App_A_counties	Listing of California counties (names and codes)
B	App_B_mdc	Listing of Major Diagnostic Categories (names and codes)
C	App_C_drg	Listing of Diagnosis Related Groups (names and codes)
E	App_E_plan_codes	Plan Codes for Expected Source of Payment
F	App_F_hospital_list	Listing of all hospitals in data set (Hospital ID#, Name, ZIP, facility level of data aggregation and total discharges)

APPENDIX A

COUNTIES OF CALIFORNIA NAMES AND CODE NUMBERS (Small county Codes in parentheses)

COUNTY		COUNTY		COUNTY	
#	<u>Name</u>	#	<u>Name</u>	#	<u>Name</u>
01	Alameda	20	Madera	40	San Luis Obispo
02	Alpine (CE)	21	Marin	41	San Mateo
03	Amador	22	Mariposa	42	Santa Barbara
04	Butte	23	Mendocino	43	Santa Clara
05	Calaveras	24	Merced	44	Santa Cruz
06	Colusa (NW)	25	Modoc (NE)	45	Shasta
07	Contra Costa	26	Mono (CE)	46	Sierra (NE)
08	Del Norte	27	Monterey	47	Siskiyou
09	El Dorado	28	Napa	48	Solano
10	Fresno	29	Neveda	49	Sonoma
11	Glenn (NW)	30	Orange	50	Stanislaus
12	Humboldt	31	Placer	51	Sutter
13	Imperial	32	Plumas (NE)	52	Tehama
14	Inyo (CE)	33	Riverside	53	Trinity (NW)
15	Kern	34	Sacramento	54	Tulare
16	Kings	35	San Benito	55	Tuolumne
17	Lake	36	San Bernardino	56	Ventura
18	Lassen	37	San Diego	57	Yolo
19	Los Angeles	38	San Francisco	58	Yuba
		39	San Joaquin		

Small County Groups: CE = Central Counties
NE = Northeastern Counties
NW = Northwestern Counties

Appendix B

Major Diagnostic Categories (MDCs) 2003

DRG Grouper Version 20.0

MDC	2003 Descriptions
01	Diseases & Disorders Of The Nervous System
02	Diseases & Disorders Of The Eye
03	Diseases & Disorders Of The Ear, Nose, Mouth & Throat
04	Diseases & Disorders Of The Respiratory System
05	Diseases & Disorders Of The Circulatory System
06	Diseases & Disorders Of The Digestive System
07	Diseases & Disorders Of The Hepatobiliary System & Pancreas
08	Diseases & Disorders Of The Musculoskeletal System & Connective Tissue
09	Diseases & Disorders Of The Skin, Subcutaneous Tissue & Breast
10	Endocrine, Nutritional & Metabolic Diseases & Disorders
11	Diseases & Disorders Of The Kidney & Urinary Tract
12	Diseases & Disorders Of The Male Reproductive System
13	Diseases & Disorders Of The Female Reproductive System
14	Pregnancy, Childbirth & The Puerperium
15	Newborns & Other Neonates With Conditions Originating In The Perinatal Period
16	Diseases & Disorders Of Blood & Blood Forming Organs & Immunological Disorders
17	Myeloproliferative Diseases & Disorders & Poorly Differentiated Neoplasms
18	Infectious & Parasitic Diseases (Systemic Or Unspecified Sites)
19	Mental Diseases & Disorders
20	Alcohol/Drug Use & Alcohol/Drug Induced Organic Mental Disorders
21	Injuries, Poisonings & Toxic Effects Of Drugs
22	Burns
23	Factors Influencing Health Status & Other Contacts With Health Services
24	Multiple Significant Trauma
25	Human Immunodeficiency Virus Infections
00	Ungroupable

Source: DRGs: Diagnosis Related Groups Definitions Manual, Version 20.0, effective 10/1/02,
Developed for the federal Health Care Financing Administration by 3M® Health
Information Systems, New Haven CT 06511

APPENDIX C

DIAGNOSIS RELATED GROUPS (DRGs) for 2003 DRG Grouper Version 20.0

DRG	MDC	Category	Description
1	1	P	Craniotomy Age >17 w cc
2	1	P	Craniotomy Age >17 w/o cc
3	1	P	Craniotomy Age 0-17
4	1	P	Spinal Procedures
5	1	P	Extracranial Vascular Procedures
6	1	P	Carpal Tunnel Release
7	1	P	Peripheral/Cranial Nerve/other Nervous System Procedures w cc
8	1	P	Peripheral/Cranial Nerve/other Nervous System Proc w/o cc
9	1	M	Spinal Disorders & Injuries
10	1	M	Nervous System Neoplasms w cc
11	1	M	Nervous System Neoplasms w/o cc
12	1	M	Degenerative Nervous System Disorders
13	1	M	Multiple Sclerosis & Cerebellar Ataxia
14	1	M	Intracranial Hemorrhage & Stroke w Infarct
15	1	M	Nonspecific Cerebrovascular & Precerebral Occlusion w/o Infarct
16	1	M	Nonspecific Cerebrovascular Disorders w cc
17	1	M	Nonspecific Cerebrovascular Disorders w/o cc
18	1	M	Cranial & Peripheral Nerve Disorders w cc
19	1	M	Cranial & Peripheral Nerve Disorders w/o cc
20	1	M	Nervous System Infection except (ex) Viral Meningitis
21	1	M	Viral Meningitis
22	1	M	Hypertensive Encephalopathy
23	1	M	Nontraumatic Stupor & Coma
24	1	M	Seizure & Headache Age >17 w cc
25	1	M	Seizure & Headache Age >17 w/o cc
26	1	M	Seizure & Headache Age 0-17
27	1	M	Traumatic Stupor & Coma, Coma >1 Hr
28	1	M	Traumatic Stupor & Coma, Coma <1 Hr Age >17 w cc
29	1	M	Traumatic Stupor & Coma, Coma <1 Hr Age >17 w/o cc
30	1	M	Traumatic Stupor & Coma, Coma <1 Hr Age 0-17
31	1	M	Concussion Age >17 w cc
32	1	M	Concussion Age >17 w/o cc
33	1	M	Concussion Age 0-17
34	1	M	Other Disorders of Nervous System w cc
35	1	M	Other Disorders of Nervous System w/o cc
36	2	P	Retinal Procedures
37	2	P	Orbital Procedures
38	2	P	Primary Iris Procedures
39	2	P	Lens Procedures w or w/o Vitrectomy
40	2	P	Extraocular Procedures ex Orbit Age >17
41	2	P	Extraocular Procedures ex Orbit Age 0-17
42	2	P	Intraocular Procedures ex Retina, Iris & Lens
43	2	M	Hyphema
44	2	M	Acute Major Eye Infections
45	2	M	Neurological Eye Disorders
46	2	M	Other Disorders of the Eye Age >17 w cc
47	2	M	Other Disorders of the Eye Age >17 w/o cc
48	2	M	Other Disorders of the Eye Age 0-17
49	3	P	Major Head & Neck Procedures
50	3	P	Sialoadenectomy
51	3	P	Salivary Gland Procedures ex Sialoadenectomy
52	3	P	Cleft Lip & Palate Repair

APPENDIX C
DIAGNOSIS RELATED GROUPS (DRGs) for 2003
DRG Grouper Version 20.0

DRG	MDC	Category	Description
53	3	P	Sinus & Mastoid Procedures Age >17
54	3	P	Sinus & Mastoid Procedures Age 0-17
55	3	P	Miscellaneous Ear, Nose, Mouth & Throat Procedures
56	3	P	Rhinoplasty
57	3	P	T&A Proc, ex Tonsillectomy &/or Adenoidectomy only, Age >17
58	3	P	T&A Proc, ex Tonsillectomy &/or Adenoidectomy only, Age 0-17
59	3	P	Tonsillectomy &/or Adenoidectomy only, Age >17
60	3	P	Tonsillectomy &/or Adenoidectomy only, Age 0-17
61	3	P	Myringotomy w Tube Insertion Age >17
62	3	P	Myringotomy w Tube Insertion Age 0-17
63	3	P	Other Ear, Nose, Mouth & Throat Operating Room (O.R.) Procedures
64	3	M	Ear, Nose, Mouth & Throat Malignancy
65	3	M	Dysequilibrium
66	3	M	Epistaxis
67	3	M	Epiglottitis
68	3	M	Otitis Media & Upper Respiratory Infection Age >17 w cc
69	3	M	Otitis Media & Upper Respiratory Infection Age >17 w/o cc
70	3	M	Otitis Media & Upper Respiratory Infection Age 0-17
71	3	M	Laryngotracheitis
72	3	M	Nasal Trauma & Deformity
73	3	M	Other Ear, Nose, Mouth & Throat Diagnoses Age >17
74	3	M	Other Ear, Nose, Mouth & Throat Diagnoses Age 0-17
75	4	P	Major Chest Procedures
76	4	P	Other Respiratory System O.R. Procedures w cc
77	4	P	Other Respiratory System O.R. Procedures w/o cc
78	4	M	Pulmonary Embolism
79	4	M	Respiratory Infections & Inflammations Age >17 w cc
80	4	M	Respiratory Infections & Inflammations Age >17 w/o cc
81	4	M	Respiratory Infections & Inflammations Age 0-17
82	4	M	Respiratory Neoplasms
83	4	M	Major Chest Trauma w cc
84	4	M	Major Chest Trauma w/o cc
85	4	M	Pleural Effusion w cc
86	4	M	Pleural Effusion w/o cc
87	4	M	Pulmonary Edema & Respiratory Failure
88	4	M	Chronic Obstructive Pulmonary Disease
89	4	M	Simple Pneumonia & Pleurisy Age >17 w cc
90	4	M	Simple Pneumonia & Pleurisy Age >17 w/o cc
91	4	M	Simple Pneumonia & Pleurisy Age 0-17
92	4	M	Interstitial Lung Disease w cc
93	4	M	Interstitial Lung Disease w/o cc
94	4	M	Pneumothorax w cc
95	4	M	Pneumothorax w/o cc
96	4	M	Bronchitis & Asthma Age >17 w cc
97	4	M	Bronchitis & Asthma Age >17 w/o cc
98	4	M	Bronchitis & Asthma Age 0-17
99	4	M	Respiratory Signs & Symptoms w cc
100	4	M	Respiratory Signs & Symptoms w/o cc
101	4	M	Other Respiratory System Diagnoses w cc
102	4	M	Other Respiratory System Diagnoses w/o cc
103		P	Heart Transplant
104	5	P	Cardiac Valve & other Major Cardiothoracic Proc w Cardiac Cath

APPENDIX C
DIAGNOSIS RELATED GROUPS (DRGs) for 2003
DRG Grouper Version 20.0

DRG	MDC	Category	Description
105	5	P	Cardiac Valve & other Major Cardiothoracic Proc w/o Cardiac Cath
106	5	P	Coronary Bypass w PTCA
107	5	P	Coronary Bypass w Cardiac Catheterization
108	5	P	Other Cardiothoracic Procedures
109	5	P	Coronary Bypass w/o Cardiac Catheterization
110	5	P	Major Cardiovascular Procedures w cc
111	5	P	Major Cardiovascular Procedures w/o cc
112	0	0	Unused DRG Placeholder Since 10/1/01
113	5	P	Amputation for Circulatory System Disorders ex Upper Limb & Toe
114	5	P	Upper Limb & Toe Amputation for Circulatory System Disorders
115	5	P	Prm Card Pacem Impl w AMI/Hrt Fail/Shk/AICD Lead/Generator Proc
116	5	P	Other Permanent Cardiac Pacemaker Implant
117	5	P	Cardiac Pacemaker Revision ex Device Replacement
118	5	P	Cardiac Pacemaker Device Replacement
119	5	P	Vein Ligation & Stripping
120	5	P	Other Circulatory System O.R. Procedures
121	5	M	Circulatory Disorders w AMI/Major Complication, Discharged Alive
122	5	M	Circulatory Disorders w AMI w/o Major Compl, Discharged Alive
123	5	M	Circulatory Disorders w AMI, Expired
124	5	M	Circulatory Disorders ex AMI, w Card Cath & Complex Diag
125	5	M	Circulatory Disorders ex AMI, w Card Cath w/o Complex Diag
126	5	M	Acute & Subacute Endocarditis
127	5	M	Heart Failure & Shock
128	5	M	Deep Vein Thrombophlebitis
129	5	M	Cardiac Arrest, Unexplained
130	5	M	Peripheral Vascular Disorders w cc
131	5	M	Peripheral Vascular Disorders w/o cc
132	5	M	Atherosclerosis w cc
133	5	M	Atherosclerosis w/o cc
134	5	M	Hypertension
135	5	M	Cardiac Congenital & Valvular Disorders Age >17 w cc
136	5	M	Cardiac Congenital & Valvular Disorders Age >17 w/o cc
137	5	M	Cardiac Congenital & Valvular Disorders Age 0-17
138	5	M	Cardiac Arrhythmia & Conduction Disorders w cc
139	5	M	Cardiac Arrhythmia & Conduction Disorders w/o cc
140	5	M	Angina Pectoris
141	5	M	Syncope & Collapse w cc
142	5	M	Syncope & Collapse w/o cc
143	5	M	Chest Pain
144	5	M	Other Circulatory System Diagnoses w cc
145	5	M	Other Circulatory System Diagnoses w/o cc
146	6	P	Rectal Resection w cc
147	6	P	Rectal Resection w/o cc
148	6	P	Major Small & Large Bowel Procedures w cc
149	6	P	Major Small & Large Bowel Procedures w/o cc
150	6	P	Peritoneal Adhesiolysis w cc
151	6	P	Peritoneal Adhesiolysis w/o cc
152	6	P	Minor Small & Large Bowel Procedures w cc
153	6	P	Minor Small & Large Bowel Procedures w/o cc
154	6	P	Stomach, Esophageal & Duodenal Procedures Age >17 w cc
155	6	P	Stomach, Esophageal & Duodenal Procedures Age >17 w/o cc
156	6	P	Stomach, Esophageal & Duodenal Procedures Age 0-17

APPENDIX C
DIAGNOSIS RELATED GROUPS (DRGs) for 2003
DRG Grouper Version 20.0

DRG	MDC	Category	Description
157	6	P	Anal & Stomal Procedures w cc
158	6	P	Anal & Stomal Procedures w/o cc
159	6	P	Hernia Procedures ex Inguinal & Femoral Age >17 w cc
160	6	P	Hernia Procedures ex Inguinal & Femoral Age >17 w/o cc
161	6	P	Inguinal & Femoral Hernia Procedures Age >17 w cc
162	6	P	Inguinal & Femoral Hernia Procedures Age >17 w/o cc
163	6	P	Hernia Procedures Age 0-17
164	6	P	Appendectomy w Complicated Principal Diagnoses w cc
165	6	P	Appendectomy w Complicated Principal Diagnoses w/o cc
166	6	P	Appendectomy w/o Complicated Principal Diagnoses w cc
167	6	P	Appendectomy w/o Complicated Principal Diagnoses w/o cc
168	3	P	Mouth Procedures w cc
169	3	P	Mouth Procedures w/o cc
170	6	P	Other Digestive System O.R. Procedures w cc
171	6	P	Other Digestive System O.R. Procedures w/o cc
172	6	M	Digestive Malignancy w cc
173	6	M	Digestive Malignancy w/o cc
174	6	M	Gastrointestinal Hemorrhage w cc
175	6	M	Gastrointestinal Hemorrhage w/o cc
176	6	M	Complicated Peptic Ulcer
177	6	M	Uncomplicated Peptic Ulcer w cc
178	6	M	Uncomplicated Peptic Ulcer w/o cc
179	6	M	Inflammatory Bowel Disease
180	6	M	Gastrointestinal Obstruction w cc
181	6	M	Gastrointestinal Obstruction w/o cc
182	6	M	Esophagitis, Gastroenteritis & Misc Digest Disorders Age >17 w cc
183	6	M	Esophagitis, Gastroenteritis/Misc Digest Disorders Age >17 w/o cc
184	6	M	Esophagitis, Gastroenteritis & Misc Digest Disorders Age 0-17
185	3	M	Dental & Oral Disease ex Extractions & Restorations, Age >17 w cc
186	3	M	Dental & Oral Disease ex Extractions & Restorations, Age 0-17
187	3	M	Dental Extractions & Restorations
188	6	M	Other Digestive System Diagnoses Age >17 w cc
189	6	M	Other Digestive System Diagnoses Age >17 w/o cc
190	6	M	Other Digestive System Diagnoses Age 0-17
191	7	P	Pancreas, Liver & Shunt Procedures w cc
192	7	P	Pancreas, Liver & Shunt Procedures w/o cc
193	7	P	Biliary Tract Proc ex only Cholecystectomy w or w/o C.D.E. w cc
194	7	P	Biliary Tract Proc ex only Cholecystectomy w or w/o C.D.E. w/o cc
195	7	P	Cholecystectomy w Common Duct Exploration (C.D.E) w cc
196	7	P	Cholecystectomy w Common Duct Exploration w/o cc
197	7	P	Cholecystectomy ex by Laparoscope w/o C.D.E. w cc
198	7	P	Cholecystectomy ex by Laparoscope w/o C.D.E. w/o cc
199	7	P	Hepatobiliary Diagnostic Procedure for Malignancy
200	7	P	Hepatobiliary Diagnostic Procedure for Non-Malignancy
201	7	P	Other Hepatobiliary or Pancreas O.R. Procedures
202	7	M	Cirrhosis & Alcoholic Hepatitis
203	7	M	Malignancy of Hepatobiliary System or Pancreas
204	7	M	Disorders of Pancreas ex Malignancy
205	7	M	Liver Disorders ex Malignancy, Cirrhosis, Alcoholic Hepa w cc
206	7	M	Liver Disorders ex Malignancy, Cirrhosis, Alcoholic Hepa w/o cc
207	7	M	Disorders of the Biliary Tract w cc
208	7	M	Disorders of the Biliary Tract w/o cc

APPENDIX C
DIAGNOSIS RELATED GROUPS (DRGs) for 2003
DRG Grouper Version 20.0

DRG	MDC	Category	Description
209	8	P	Major Joint & Limb Reattachment Procedures of Lower Extremity
210	8	P	Hip & Femur Procedures ex Major Joint Age >17 w cc
211	8	P	Hip & Femur Procedures ex Major Joint Age >17 w/o cc
212	8	P	Hip & Femur Procedures ex Major Joint Age 0-17
213	8	P	Amputation for Musculoskeletal System/Connective Tissue Disorders
214	0	0	Unused DRG Place Holder Since 10-1-97
215	0	0	Unused DRG Place Holder Since 10-1-97
216	8	P	Biopsies Musculoskeletal System & Connective Tissue
217	8	P	Wnd Debride/Skn Gft ex Hand, for Musculosk/Connective Tissue Dis
218	8	P	Lower Extrem & Humer Proc ex Hip, Foot, Femur Age >17 w cc
219	8	P	Lower Extrem & Humer Proc ex Hip, Foot, Femur Age >17 w/o cc
220	8	P	Lower Extrem & Humer Proc ex Hip, Foot, Femur Age 0-17
221	0	0	Unused DRG Place Holder Since 10-1-97
222	0	0	Unused DRG Place Holder Since 10-1-97
223	8	P	Major Shoulder/Elbow Proc, or Other Upper Extremity Proc w cc
224	8	P	Shoulder, Elbow or Forearm Proc, ex Major Joint Proc, w/o cc
225	8	P	Foot Procedures
226	8	P	Soft Tissue Procedures w cc
227	8	P	Soft Tissue Procedures w/o cc
228	8	P	Major Thumb or Joint Proc, or Other Hand or Wrist Proc w cc
229	8	P	Hand or Wrist Procedures, ex Major Joint Procedures, w/o cc
230	8	P	Local Excision/Removal of Internal Fixation Devices of Hip/Femur
231	8	P	Local Excision/Removal of Int Fixation Devices ex of Hip/Femur
232	8	P	Arthroscopy
233	8	P	Other Musculoskeletal System & Connective Tissue O.R. Proc w cc
234	8	P	Other Musculoskeletal System & Connective Tissue O.R. Proc w/o cc
235	8	M	Fractures of Femur
236	8	M	Fractures of Hip & Pelvis
237	8	M	Sprains, Strains, & Dislocations of Hip, Pelvis & Thigh
238	8	M	Osteomyelitis
239	8	M	Pathological Fractures/Musculoskeletal/Connective Tissue Malig
240	8	M	Connective Tissue Disorders w cc
241	8	M	Connective Tissue Disorders w/o cc
242	8	M	Septic Arthritis
243	8	M	Medical Back Problems
244	8	M	Bone Disease & Specific Arthropathies w cc
245	8	M	Bone Disease & Specific Arthropathies w/o cc
246	8	M	Non-Specific Arthropathies
247	8	M	Signs & Symptoms Musculoskeletal System & Connective Tissue
248	8	M	Tendonitis, Myositis & Bursitis
249	8	M	Aftercare, Musculoskeletal System & Connective Tissue
250	8	M	Fracture(Fx), Sprn, Strn/Disl of Forearm/Hand/Foot Age >17 w cc
251	8	M	Fracture, Sprn, Strn/Disl of Forearm, Hand, Foot Age >17 w/o cc
252	8	M	Fracture, Sprain, Strain/Disl of Forearm, Hand, Foot Age 0-17
253	8	M	Fracture, Sprn, Strn/Disl of Uparm, Low Leg ex Foot Age >17 w cc
254	8	M	Fx, Sprain, Strain/Disl of Uparm/Low Leg ex Foot Age >17 w /o cc
255	8	M	Fracture, Sprain, Strain/Disl of Uparm, Low Leg ex Foot Age 0-17
256	8	M	Other Musculoskeletal System & Connective Tissue Diagnoses
257	9	P	Total Mastectomy for Malignancy w cc
258	9	P	Total Mastectomy for Malignancy w/o cc
259	9	P	Subtotal Mastectomy for Malignancy w cc
260	9	P	Subtotal Mastectomy for Malignancy w/o cc

APPENDIX C
DIAGNOSIS RELATED GROUPS (DRGs) for 2003
DRG Grouper Version 20.0

DRG	MDC	Category	Description
261	9	P	Breast Procedure for Non-Malignancy ex Biopsy & Local Excision
262	9	P	Breast Biopsy & Local Excision for Non-Malignancy
263	9	P	Skin Graft &/or Debride for Skin Ulcer or Cellulitis w cc
264	9	P	Skin Graft &/or Debride for Skin Ulcer or Cellulitis w/o cc
265	9	P	Skin Graft &/or Debride ex for Skin Ulcer or Cellulitis w cc
266	9	P	Skin Graft &/or Debride ex for Skin Ulcer or Cellulitis w/o cc
267	9	P	Perianal & Pilonidal Procedures
268	9	P	Skin, Subcutaneous Tissue & Breast Plastic Procedures
269	9	P	Other Skin, Subcutaneous Tissue & Breast Procedures w cc
270	9	P	Other Skin, Subcutaneous Tissue & Breast Procedures w/o cc
271	9	M	Skin Ulcers
272	9	M	Major Skin Disorders w cc
273	9	M	Major Skin Disorders w/o cc
274	9	M	Malignant Breast Disorders w cc
275	9	M	Malignant Breast Disorders w/o cc
276	9	M	Non-Malignant Breast Disorders
277	9	M	Cellulitis Age >17 w cc
278	9	M	Cellulitis Age >17 w/o cc
279	9	M	Cellulitis Age 0-17
280	9	M	Trauma to the Skin, Subcutaneous Tissue & Breast Age >17 w cc
281	9	M	Trauma to the Skin, Subcutaneous Tissue & Breast Age >17 w/o cc
282	9	M	Trauma to the Skin, Subcutaneous Tissue & Breast Age 0-17
283	9	M	Minor Skin Disorders w cc
284	9	M	Minor Skin Disorders w/o cc
285	10	P	Amputate Lower Limb for Endocrine, Nutritional, & Metabolic Dis
286	10	P	Adrenal & Pituitary Procedures
287	10	P	Skn Grfts/Wound Debride for Endocrine/Nutritional/Metabolic Dis
288	10	P	O.R. Procedures for Obesity
289	10	P	Parathyroid Procedures
290	10	P	Thyroid Procedures
291	10	P	Thyroglossal Procedures
292	10	P	Other Endocrine, Nutritional & Metabolic O.R. Proc w cc
293	10	P	Other Endocrine, Nutritional & Metabolic O.R. Proc w/o cc
294	10	M	Diabetes Age >35
295	10	M	Diabetes Age 0-35
296	10	M	Nutritional & Misc Metabolic Disorders Age >17 w cc
297	10	M	Nutritional & Misc Metabolic Disorders Age >17 w/o cc
298	10	M	Nutritional & Misc Metabolic Disorders Age 0-17
299	10	M	Inborn Errors of Metabolism
300	10	M	Endocrine Disorders w cc
301	10	M	Endocrine Disorders w/o cc
302	11	P	Kidney Transplant
303	11	P	Kidney, Ureter & Major Bladder Procedures for Neoplasm
304	11	P	Kidney, Ureter & Major Bladder Procedures for Non-Neoplasm w cc
305	11	P	Kidney, Ureter & Major Bladder Procedures for Non-Neoplasm w/o cc
306	11	P	Prostatectomy w cc
307	11	P	Prostatectomy w/o cc
308	11	P	Minor Bladder Procedures w cc
309	11	P	Minor Bladder Procedures w/o cc
310	11	P	Transurethral Procedures w cc
311	11	P	Transurethral Procedures w/o cc
312	11	P	Urethral Procedures, Age >17 w cc

APPENDIX C
DIAGNOSIS RELATED GROUPS (DRGs) for 2003
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DRG	MDC	Category	Description
313	11	P	Urethral Procedures, Age >17 w/o cc
314	11	P	Urethral Procedures, Age 0-17
315	11	P	Other Kidney & Urinary Tract O.R. Procedures
316	11	M	Renal Failure
317	11	M	Admit for Renal Dialysis
318	11	M	Kidney & Urinary Tract Neoplasms w cc
319	11	M	Kidney & Urinary Tract Neoplasms w/o cc
320	11	M	Kidney & Urinary Tract Infections Age >17 w cc
321	11	M	Kidney & Urinary Tract Infections Age >17 w/o cc
322	11	M	Kidney & Urinary Tract Infections Age 0-17
323	11	M	Urinary Stones w cc, &/or Extracorporeal Shock Wave Lithotripsy
324	11	M	Urinary Stones w/o cc
325	11	M	Kidney & Urinary Tract Signs & Symptoms Age >17 w cc
326	11	M	Kidney & Urinary Tract Signs & Symptoms Age >17 w/o cc
327	11	M	Kidney & Urinary Tract Signs & Symptoms Age 0-17
328	11	M	Urethral Stricture Age >17 w cc
329	11	M	Urethral Stricture Age >17 w/o cc
330	11	M	Urethral Stricture Age 0-17
331	11	M	Other Kidney & Urinary Tract Diagnoses Age >17 w cc
332	11	M	Other Kidney & Urinary Tract Diagnoses Age >17 w/o cc
333	11	M	Other Kidney & Urinary Tract Diagnoses Age 0-17
334	12	P	Major Male Pelvic Procedures w cc
335	12	P	Major Male Pelvic Procedures w/o cc
336	12	P	Transurethral Prostatectomy w cc
337	12	P	Transurethral Prostatectomy w/o cc
338	12	P	Testes Procedures, for Malignancy
339	12	P	Testes Procedures, Non-Malignancy Age >17
340	12	P	Testes Procedures, Non-Malignancy Age 0-17
341	12	P	Penis Procedures
342	12	P	Circumcision Age >17
343	12	P	Circumcision Age 0-17
344	12	P	Other Male Reproductive System O.R. Proc for Malignancy
345	12	P	Other Male Reproductive System O.R. Proc ex for Malignancy
346	12	M	Malignancy Male Reproductive System w cc
347	12	M	Malignancy Male Reproductive System w/o cc
348	12	M	Benign Prostatic Hypertrophy w cc
349	12	M	Benign Prostatic Hypertrophy w/o cc
350	12	M	Inflammation of Male Reproductive System
351	12	M	Sterilization, Male
352	12	M	Other Male Reproductive System Diagnoses
353	13	P	Pelvic Evisceration, Radical Hysterectomy & Radical Vulvectomy
354	13	P	Uterine, Adnexa Proc for Non-Ovarian/Adnexal Malignancy w cc
355	13	P	Uterine, Adnexa Proc for Non-Ovarian/Adnexal Malignancy w/o cc
356	13	P	Female Reproductive System Reconstructive Procedures
357	13	P	Uterine & Adnexa Proc for Ovarian or Adnexal Malignancy
358	13	P	Uterine & Adnexa Proc for Non-Malignancy w cc
359	13	P	Uterine & Adnexa Proc for Non-Malignancy w/o cc
360	13	P	Vagina, Cervix & Vulva Procedures
361	13	P	Laparoscopy & Incisional Tubal Interruption
362	13	P	Endoscopic Tubal Interruption
363	13	P	Dilation & Curettage, Conization & Radio-Implant, for Malignancy
364	13	P	Dilation & Curettage, Conization ex for Malignancy

APPENDIX C
DIAGNOSIS RELATED GROUPS (DRGs) for 2003
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DRG	MDC	Category	Description
365	13	P	Other Female Reproductive System O.R. Procedures
366	13	M	Malignancy Female Reproductive System w cc
367	13	M	Malignancy Female Reproductive System w/o cc
368	13	M	Infections, Female Reproductive System
369	13	M	Menstrual & other Female Reproductive System Disorders
370	14	P	Cesarean Section w cc
371	14	P	Cesarean Section w/o cc
372	14	M	Vaginal Delivery w Complicating Diagnoses
373	14	M	Vaginal Delivery w/o Complicating Diagnoses
374	14	P	Vaginal Delivery w Sterilization &/or Dilation & Curettage
375	14	P	Vaginal Delivery w O.R. Proc ex Sterilization/Dilation/Curettage
376	14	M	Postpartum & Post Abortion Diagnoses w/o O.R. Procedure
377	14	P	Postpartum & Post Abortion Diagnoses w O.R. Procedure
378	14	M	Ectopic Pregnancy
379	14	M	Threatened Abortion
380	14	M	Abortion w/o Dilation & Curettage
381	14	P	Abortion w Dilation/Curettage Aspiration Curettage or Hysterotomy
382	14	M	False Labor
383	14	M	Other Antepartum Diagnoses w Medical Complications
384	14	M	Other Antepartum Diagnoses w/o Medical Complications
385	15	M	Neonates, Died or Transferred to another Acute Care Facility
386	15	M	Extreme Immaturity or Respiratory Distress Syndrome, Neonate
387	15	M	Prematurity w Major Problems
388	15	M	Prematurity w/o Major Problems
389	15	M	Full Term Neonate w Major Problems
390	15	M	Neonate w other Significant Problems
391	15	M	Normal Newborn
392	16	P	Splenectomy Age >17
393	16	P	Splenectomy Age 0-17
394	16	P	Other O.R. Procedures of the Blood & Blood Forming Organs
395	16	M	Red Blood Cell Disorders Age >17
396	16	M	Red Blood Cell Disorders Age 0-17
397	16	M	Coagulation Disorders
398	16	M	Reticuloendothelial & Immunity Disorders w cc
399	16	M	Reticuloendothelial & Immunity Disorders w/o cc
400	17	P	Lymphoma & Leukemia w Major O.R. Procedure
401	17	P	Lymphoma & Non-Acute Leukemia w other O.R. Procedure w cc
402	17	P	Lymphoma & Non-Acute Leukemia w other O.R. Procedure w/o cc
403	17	M	Lymphoma & Non-Acute Leukemia w cc
404	17	M	Lymphoma & Non-Acute Leukemia w/o cc
405	17	M	Acute Leukemia w/o Major O.R. Procedure 0-17
406	17	P	Myeloprolif Disord/Poorly Diff Neopl w Major O.R. Proc w cc
407	17	P	Myeloprolif Disord or Poorly Diff Neopl w Major O.R. Proc w/o cc
408	17	P	Myeloproliferative Disord or Poorly Diff Neopl w other O.R. Proc
409	17	M	Radiotherapy
410	17	M	Chemotherapy w/o Acute Leukemia as Secondary Diagnosis
411	17	M	History of Malignancy w/o Endoscopy
412	17	M	History of Malignancy w Endoscopy
413	17	M	Other Myeloprolif Disorder or Poorly Diff Neoplasm Diag w cc
414	17	M	Other Myeloprolif Disorder or Poorly Diff Neoplasm Diag w/o cc
415	18	P	O.R. Procedure for Infectious & Parasitic Diseases
416	18	M	Septicemia Age >17

APPENDIX C
DIAGNOSIS RELATED GROUPS (DRGs) for 2003
DRG Grouper Version 20.0

DRG	MDC	Category	Description
417	18	M	Septicemia Age 0-17
418	18	M	Postoperative & Post-Traumatic Infections
419	18	M	Fever of Unknown Origin Age >17 w cc
420	18	M	Fever of Unknown Origin Age >17 w/o cc
421	18	M	Viral Illness Age >17
422	18	M	Viral Illness & Fever of Unknown Origin Age 0-17
423	18	M	Other Infectious & Parasitic Diseases Diagnoses
424	19	P	O.R. Procedure w Principal Diagnoses of Mental Illness
425	19	M	Acute Adjust Reaction & Psychosocial Dysfunction
426	19	M	Depressive Neuroses
427	19	M	Neuroses ex Depressive
428	19	M	Disorders of Personality & Impulse Control
429	19	M	Organic Disturbances & Mental Retardation
430	19	M	Psychoses
431	19	M	Childhood Mental Disorders
432	19	M	Other Mental Disorder Diagnoses
433	20	M	Alcohol/Drug Abuse or Dependence, Left Against Medical Advise
434	0	0	Unused DRG Placeholder Since 10/1/01
435	0	0	Unused DRG Placeholder Since 10/1/01
436	0	0	Unused DRG Placeholder Since 10/1/01
437	0	0	Unused DRG Placeholder Since 10/1/01
438	0	0	Unused DRG Placeholder Since 10/1/85
439	21	P	Skin Grafts for Injuries
440	21	P	Wound Debridements for Injuries
441	21	P	Hand Procedures for Injuries
442	21	P	Other O.R. Procedures for Injuries w cc
443	21	P	Other O.R. Procedures for Injuries w/o cc
444	21	M	Traumatic Injury Age >17 w cc
445	21	M	Traumatic Injury Age >17 w/o cc
446	21	M	Traumatic Injury Age 0-17
447	21	M	Allergic Reactions Age >17
448	21	M	Allergic Reactions Age 0-17
449	21	M	Poisoning & Toxic Effects of Drugs Age >17 w cc
450	21	M	Poisoning & Toxic Effects of Drugs Age >17 w/o cc
451	21	M	Poisoning & Toxic Effects of Drugs Age 0-17
452	21	M	Complications of Treatment w cc
453	21	M	Complications of Treatment w/o cc
454	21	M	Other Injury, Poisoning & Toxic Effects Diagnosis w cc
455	21	M	Other Injury, Poisoning & Toxic Effects Diagnosis w/o cc
456	0	0	Unused DRG Placeholder Since 10/1/98
457	0	0	Unused DRG Placeholder Since 10/1/98
458	0	0	Unused DRG Placeholder Since 10/1/98
459	0	0	Unused DRG Placeholder Since 10/1/98
460	0	0	Unused DRG Placeholder Since 10/1/98
461	23	P	O.R. Procedure w Diagnoses of other Contact w Health Services
462	23	M	Rehabilitation
463	23	M	Signs & Symptoms w cc
464	23	M	Signs & Symptoms w/o cc
465	23	M	Aftercare w History of Malignancy as Secondary Diagnosis
466	23	M	Aftercare w/o History of Malignancy as Secondary Diagnosis
467	23	M	Other Factors Influencing Health Status
468		P	Extensive O.R. Procedure Unrelated to Principal Diagnosis

APPENDIX C
DIAGNOSIS RELATED GROUPS (DRGs) for 2003
DRG Grouper Version 20.0

DRG	MDC	Category	Description
469		M	Principal Diagnosis Invalid as Discharge Diagnosis
470		X	Ungroupable
471	8	P	Bilateral or Multiple Major Joint Procedures of Lower Extremity
472	0	0	Unused DRG Placeholder Since 10/1/1998
473	17	M	Acute Leukemia w/o Major O.R. Procedure Age >17
474	0	0	Unused DRG Placeholder Since 10/1/1991
475	4	M	Respiratory System Diagnosis w Ventilator Support
476		P	Prostatic O.R. Procedure Unrelated to Principal Diagnosis
477		P	Non-Extensive O.R. Procedure Unrelated to Principal Diagnosis
478	5	P	Other Vascular Procedures w cc
479	5	P	Other Vascular Procedures w/o cc
480		P	Liver Transplant
481		P	Bone Marrow Transplant
482		P	Tracheostomy for Face, Mouth & Neck Diagnoses
483		P	Trach w Mech Vent 96+ Hrs or PDX ex Face, Mouth & Neck Diagnoses
484	24	P	Craniotomy for Multiple Significant Trauma
485	24	P	Limb Reattach, Hip & Femur Proc for Multiple Significant Trauma
486	24	P	Other O.R. Procedures for Multiple Significant Trauma
487	24	M	Other Multiple Significant Trauma
488	25	P	HIV w Extensive O.R. Procedure
489	25	M	HIV w Major Related Condition
490	25	M	HIV w or w/o other Related Condition
491	8	P	Major Joint & Limb Reattachment Procedures of Upper Extremity
492	17	M	Chemotherapy w Acute Leukemia as Secondary Diagnosis
493	7	P	Laparoscopic Cholecystectomy w/o Common Duct Exploration w cc
494	7	P	Laparoscopic Cholecystectomy w/o Common Duct Exploration w/o cc
495		P	Lung Transplant
496	8	P	Combined Anterior/Posterior Spinal Fusion
497	8	P	Spinal Fusion ex Cervical w cc
498	8	P	Spinal Fusion ex Cervical w/o cc
499	8	P	Back & Neck Procedures ex Spinal Fusion w cc
500	8	P	Back & Neck Procedures ex Spinal Fusion w/o cc
501	8	P	Knee Procedures w Principal Diagnosis of Infection w cc
502	8	P	Knee Procedures w Principal Diagnosis of Infection w/o cc
503	8	P	Knee Procedures w/o Principal Diagnosis of Infection
504	22	P	Extensive 3Rd Degree Burns w Skin Graft
505	22	M	Extensive 3Rd Degree Burns w/o Skin Graft
506	22	P	Full Thickness Burn w Skin Grft/Inhalation Injury w cc/Sig Trauma
507	22	P	Full Thickness Burn w Skin Graft/Inhal Injury w/o cc/Sig Trauma
508	22	M	Full Thickness Burn w/o Skin Graft/Inhal Injury w cc/Sig Trauma
509	22	M	Full Thickness Burn w/o Skin Graft/Inhal Injury w/o cc/Sig Trauma
510	22	M	Non-Extensive Burns w cc or Significant Trauma
511	22	M	Non-Extensive Burns w/o cc or Significant Trauma
512		P	Simultaneous Pancreas/Kidney Transplant
513		P	Pancreas Transplant
514	5	P	Cardiac Defibrillator Implant w Cardiac Catheterization
515	5	P	Cardiac Defibrillator Implant w/o Cardiac Catheterization
516	5	P	Percutaneous Cardiovasc Proc w Acute Myocardial Infarction (AMI)
517	5	P	Percutaneous Cardiovasc Proc w Non-Drug Coronary Stent w/o AMI
518	5	P	Percutaneous Cardiovascular Proc w/o Coronary Artery Stent or AMI
519	8	P	Cervical Spinal Fusion w cc
520	8	P	Cervical Spinal Fusion w/o cc

APPENDIX C
DIAGNOSIS RELATED GROUPS (DRGs) for 2003
DRG Grouper Version 20.0

DRG	MDC	Category	Description
521	20	M	Alcohol/Drug Abuse or Dependence w cc
522	20	M	Alcohol/Drug Abuse or Dependence w Rehab Therapy w/o cc
523	20	M	Alcohol/Drug Abuse or Dependence w/o Rehab Therapy w/o cc
524	1	M	Transient Ischemia
525	5	P	Heart Assist System Implant
526	5	P	Percutaneous Cardiovascular Proc w Drug Eluting Stent w AMI
527	5	P	Percutaneous Cardiovascular Proc w Drug Eluting Stent w/o AMI

NOTES

DRGs

First, the major diagnostic category (MDC) is assigned based on the principal diagnosis. Then, the record is assigned to one of the diagnosis related groups (DRG) within that MDC.

Pre MDC DRGs

For the five DRGs listed below, the DRG is assigned first, based on any procedure for liver transplant, bone marrow transplant, tracheostomy, or lung transplant, then it is assigned an MDC based on principal diagnosis:

- 480 - Liver Transplant
- 481 - Bone Marrow Transplant
- 482 - Tracheostomy for Face, Mouth & Neck Diagnoses
- 483 - Tracheostomy Except for Face, Mouth & Neck Diagnoses
- 495 - Lung Transplant

Unrelated DRGs:

The current version of the Grouper has four DRGs (468, 470, 476, and 477) whose patients may be assigned to a variety of MDCs, based on the principal diagnosis. Patients are assigned to DRGs 468, 476 or 477 when all procedures performed are unrelated to the principal diagnosis. Some patients in DRG 470 are not assigned by the Grouper to any MDC; their MDC is shown as 00 (Ungroupable). Records fall in DRG 470 because the information on the record is considered inconsistent or invalid by the Grouper's algorithm.

CC

Complications or Comorbidities. A **comorbidity** is a pre-existing condition which, because of its presence with a specific principal diagnosis, affects the treatment received, and/or length of stay by at least one day in 75% of the cases, and therefore affects the DRG assignment. A complication is a condition that develops following treatment and may affect the treatment received and/or may affect the length of stay by at least one day in at least 75% of the cases, and therefore affects the DRG assignment.

The Health Care Financing Administration (HCFA) developed five principles for complication and comorbidity:

- 1 - Chronic and acute manifestations of the same condition should not be considered CCs for one another.
- 2 - Specific and nonspecific diagnosis codes for a condition should not be considered CCs for one another.
- 3 - Conditions that may not coexist, such as partial/total, unilateral/bilateral, obstructed/unobstructed, and benign/malignant should not be considered CCs for one another.
- 4 - The same condition in anatomically proximal sites, such as congenital/acquired, should not be considered CCs for one another.
- 5 - Closely related conditions, such as symptoms to the related condition (e.g., dysuria and urinary tract infection), should not be considered CCs for one another.

Med/Surg

P = Procedural (surgical)

Source:

DRGs: Diagnostic Related Groups Definitions Manual, Version 20.0, effective 10/1/02, Developed for the federal Health Care Financing Administration by 3M® Health Information Systems, New Haven CT 06511

APPENDIX D

January - December 2003 Patient Discharge Data Exceptions by Hospital Name

ID#	Facility Name	Begin Date	End Date	Data Element	Comments
370749	Alvarado Parkway Institute B.H.S.	07/01/2003	12/31/2003	Expected Source of Payment	Facility states that they are experiencing mapping problems that have affected the July-December 2003 report period.
361105	Barstow Community Hospital	01/01/2003	06/30/2003	Other Diagnoses Condition Present at Admission	Data mapping error (100% are coded "no")
190685	Elastar Community Hospital	07/01/2003	06/30/2004	Other Diagnoses Condition Present at Admission	Facility states that there was a discrepancy in the understanding of this criteria. Coders understanding was that the code pertained to the patient throughout the entire patient stay (thus all codes were noted as Yes present on admission).
150775	Good Samaritan Hospital-Bakersfield	01/01/2003	06/30/2003	Other Diagnoses Condition Present at Admission	Per facility and analyst - facility defaulting to "Yes."
190348	GRANADA HILLS COMMUNITY HOSP.	07/01/2003	08/07/2003	All	Facility closed on 08/7/2003. There will not be any staff available to correct any problems detected.
	All Kaiser Foundation Hospitals (see Appendix F, hospital listing for respective ID numbers.)	01/01/2003	12/31/2003	Total Charges	Kaiser does not report total charges (Jan-Dec). Only a small percentage of Kaiser Foundation Hospital patients are not capitated Kaiser members (who incur no additional charge as inpatients). Kaiser members pay constant monthly premiums, whether or not they are hospital inpatients.
361246	Loma Linda University Medical Center	01/01/2003	06/30/2003	Expected Source of Payment	Mapping issues caused inaccurate reporting of entire data element. Per facility - mapping issues exist from a change over of reporting systems.
201281	Madera Community Hospital	01/01/2003	06/30/2003	Other Diagnoses Condition Present at Admission	Facility states they are unable to go back and review all 3095 records to correct Other CPA for ones with NO or Uncertain. Facility said it occurred due to new coders.

APPENDIX D

January - December 2003 Patient Discharge Data Exceptions by Hospital Name

ID#	Facility Name	Begin Date	End Date	Data Element	Comments
450936	Mayers Memorial Hospital	07/01/2001	12/31/2003	Other Diagnoses Condition Present at Admission	The facility lost their medical records director in November 2002 and they also have new computer software.
				Type of Admission	
414018	Menlo Park Surgical Hospital	07/01/2002	06/30/2003	Race	Facility states that their Admitting Department was not asking for Race. Facility cannot correct records at this time.
13687	Merritt Peralta Institute CDRH	01/01/2003	12/31/2003	Principal Procedure	Per facility - The greater than 5% difference in principal procedure from previous reporting periods occurred because of a new physician at the chemical dependency unit. The physician did not fully understand the treatment provided to the patient must be clearly and explicitly stated in the body of the report in order for Medical Records to code it as a principal procedure. An appropriate documentation in service was provided to the physician in question.
190534	Midway Hospital Medical Center	1/1/2003 - 6/30/2003		Source of Admission	Data not collected correctly.
				Prehospital Care and Resuscitation	Hospital unable to perform reviews of SNF records with no clear DNR documentation.
361266	Mountains Community Hospital	1/1/2003 - 12/31/03		Prehospital Care and Resuscitation	Per facility - data in error due to hospital oversight.
				Race (Ethnicity Portion Only)	
		7/1/2003 - 12/31/03		Source of Admission	
				Expected Source of Payment	
				Other Diagnoses Condition Present at Admission	
274043	Natividad Medical Center	01/01/2003	06/30/2003	Total Charges	Reported normal newborn total charges with no other DX being reported. These charges were reported incorrectly (high). Hospital has corrected the data for 7/1/03 to 12/30/03.
190605	Pine Grove Hospital	01/01/2003	03/28/2003	All	Facility closed on 03/28/2003. There will not be any staff available to correct any problems detected.
190631	Presbyterian Intercommunity Hospital	01/01/2003	12/31/2003	Expected Source of Payment	A mapping issue that cannot be corrected in time for this data.
14113	S.T.A.R.S. - P.H.F.	07/01/2003	12/31/2003	All	Facility closed on 12/31/2003. There will not be any staff available to correct any problems detected.

APPENDIX D

January - December 2003 Patient Discharge Data Exceptions by Hospital Name

ID#	Facility Name	Begin Date	End Date	Data Element	Comments
13619	San Leandro Hospital	01/01/2003	06/30/2003	Type of Admission	Programming changes in facility software. The changes caused Type of Admission not to be collected between 4/11/2003 through 5/31/2003.
344114	Shriners Hospital - Northern Calif	01/01/2003	12/31/2003	Total Charges	<p>Received a Modification Request for the facility to report total charges as \$0 rather than \$1 for the 2003 reporting periods. Per facility, "this is in keeping with the type of service that Shriners supplies in that services rendered are not charged for."</p> <p>(Note - All records for Shriner's Hospital - Northern California are different than other reported hospital "No Charge" records (including Shriners-LA), because "1" is a code to identify "no charge" stays (no charges were intended). By reporting charges equal 0, all records for Shriners - Northern California for 2003 now appear to have "missing/invalid data" for Total Charges. See Total Charges definition on page 26 of documentation).</p>
334068	Southwest Healthcare System-Murrieta	01/01/2003	12/31/2003	Race (Ethnicity Portion Only)	Data incorrectly reported for Ethnicity Unknown and will not be corrected until the 1 to 6 2004 reporting period.
380964	St. Luke's Hospital	01/01/2003	12/31/2003	Prehospital Care and Resuscitation	According to facility - "there is a flaw in our system."
574010	Sutter Davis Hospital	07/01/2003	12/31/2003	Expected Source of Payment Name of Plan	The facility using plan code 8000 excessively and incorrectly. 36.66% of all plan codes reported fell into the 8000 (unknown) category.
540816	Tulare District Hospital	07/01/2002	06/30/2003	Expected Source of Payment	Facility states that they have experienced interfacing problems affecting Private Coverage payer incorrectly reported with Managed Care Other instead of Traditional type of coverage during the periods July-December 2002

APPENDIX E

2003 MANAGED CARE - KNOX-KEENE/MCOHS

Table 1 - Knox-Keene Licensed Plans and Plan Code Numbers	
Plan Code Numbers	Plan Code Names
0000	Plan Code not applicable
0176	Aetna Health Plans of California, Inc.
0328	Alameda Alliance for Health
0303	Blue Cross of California
0043	Blue Shield of California
0314	BPS HMO
0365	Calaveras Provider Network
0326	Care 1st Health Plan
0366	Cedars-Sinai Provider Plan, LLC
0278	Chinese Community Health Plan
0152	Cigna Healthcare of California, Inc.
0200	Community Health Group
0248	Community Health Plan (County of Los Angeles)
0360	Concentrated Care, Inc.
0054	Contra Costa Health Plan
0350	FPA Medical Management of California, Inc
0327	Great American Health Plan
0317	Greater Pacific HMO Inc
0292	HAI, Hai-Ca
0277	Healthmax America
0300	Health Net
0126	Health Plan of America (HPA)
0159	Health Plan of the Redwoods
0358	Health Plan of San Mateo Health Families, not COHS
0357	Heritage Provider Network, Inc.
0231	Holman Professional Counseling Centers
0346	Inland Empire Health Plan
0151	Inter Valley Health Plan
0289	Kaiser Foundation Added Choice Health Plan
0055	Kaiser Foundation Health Plan, Inc.
0335	Kern Health Systems Inc
0343	Key Health Plan of California
0343	Key HMO Key Choice
0142	Lifeguard, Inc.
0355	LA Care Health Plan
0196	Managed Health Network
0002	Maxicare
0298	MCC Behavioral Care of California, Inc.
0345	MedPartners Provider Network, Inc.
0266	Metrahealth Care Plan
0288	Merit Behavioral Care of California, Inc.
0322	Molina
0222	National Health Plans
0222	National HMO
0238	Omni Healthcare, Inc.
0325	One Health Plan of California Inc.
0385	On Lok Senior Health Services
0301	Pacificare Behavioral Health of California Inc.
0126	Pacificare of California

APPENDIX E

2003 MANAGED CARE - KNOX-KEENE/MCOHS

Table 1 - Knox-Keene Licensed Plans and Plan Code Numbers	
Plan Code Numbers	Plan Code Names
0367	Primecare Medical Network, Inc. A CA. Corp.
0237	Priorityplus of California
0296	Prucare Plus
0300	Qualmed Plans for Health
0354	Regents of the University of California
0349	San Francisco Health Plan
0351	Santa Clara Family Health Plan
0377	Scripps Clinic Health Plan Services, Inc.
0126	Secure Horizons
0310	Sharp Health Plan
0393	Simnsa Healthcare
0393	Sistemas Medicos Nacionales, S.A. De C.V.
0212	Smartcare Health Plan
0338	The Health Plan of San Joaquin
0363	Thipa Management Consultants, Incorporated
0324	Tower Health Service
0266	UHC Healthcare
0008	UHP Healthcare
0209	Universal Care
0236	Valley Health Plan
0293	Value Behavioral Health & American Psychol.
0344	Ventura County Health Care Plan
0102	Vista Behavioral Health Plan
0348	Western Health Advantage
8000	Other HMO

Table 2. Medi-Cal County Organized Health Systems and Plan Code Numbers	
Plan Code Numbers	Name of Medi-Cal County Organized Health System
0000	Plan Code not applicable
9030	Cal Optima (Orange County)
9044	Central Coast Alliance for Health (Santa Cruz County)
9041	Health Plan of San Mateo (San Mateo County)
9042	Santa Barbara Health Authority (Santa Barbara County)
9048	Solano Partnership Health Plan (Solano County)

Related Plans: If the plan code numbers are the same and the plan names are different, it means they belong to same "parent" plan.

APPENDIX F
HOSPITAL LOCATION LISTING
Calendar Year 2003

See footnotes on last page.

OSHPD ID Number	Facility Name	Zip Code	DHS/DMH* License Number	Level of Data Aggregation**	Number of Consolidated Locations***	Total Discharges
010846	ALAMEDA COUNTY MEDICAL CENTERS	94602	140000046	Consolidated	2	14,467
010735	ALAMEDA HOSPITAL	94501	140000002	Single Facility		3,109
190017	ALHAMBRA HOSPITAL	91801	930000005	Single Facility		4,259
010844	ALTA BATES SUMMIT MED CTR - HERRICK CAMPUS	94704	140000004	Satellite Facility		3,746
010739	ALTA BATES SUMMIT MED CTR-ALTA BATES CAMPUS	94705	140000004	Parent Facility		25,753
010937	ALTA BATES SUMMIT MEDICAL CENTERS	94609	140000284	Consolidated	2	23,234
370652	ALVARADO HOSPITAL MEDICAL CENTERS	92120	90000013	Consolidated	2	10,238
370749	ALVARADO PARKWAY INSTITUTE B.H.S.	91942	80000079	Single Facility		2,025
194010	AMERICAN RECOVERY CENTER	91768	930000412	Single Facility		1,578
301097	ANAHEIM GENERAL HOSPITALS	92804	60000079	Consolidated	2	3,698
301098	ANAHEIM MEMORIAL MEDICAL CENTER	92801	60000080	Consolidated	2	16,000
364188	ANGELS HOSPITAL	91730	240000652	Single Facility		52
190034	ANTELOPE VALLEY HOSPITAL MEDICAL CENTER	93534	930000008	Single Facility		26,974
364231	ARROWHEAD REGIONAL MEDICAL CENTER	92314	240000197	Single Facility		22,754
400466	ARROYO GRANDE COMMUNITY HOSPITAL	93420	50000021	Single Facility		3,482
190163	AURORA CHARTER OAK	91724	930000031	Single Facility		4,174
190462	AURORA LAS ENCINAS HOSPITAL, LLC	91107	930000087	Single Facility		2,367
374024	AURORA SAN DIEGO	92128	80000310	Single Facility		2,601
560203	AURORA VISTA DEL MAR HOSPITAL	93001	50000016	Single Facility		2,661
190045	AVALON MUNICIPAL HOSPITAL	90704	930000010	Single Facility		107
154101	BAKERSFIELD HEART HOSPITAL	93308	120000526	Single Facility		3,171
154044	BAKERSFIELD MEMORIAL HOSPITAL - WHITE LANE	93309	120000181	Satellite Facility		1,153
150722	BAKERSFIELD MEMORIAL HOSPITAL- 34TH STREET	93301	120000181	Parent Facility		16,697
184008	BANNER LASSEN MEDICAL CENTER	96130	230000020	Single Facility		900
190052	BARLOW RESPIRATORY HOSPITAL	90026	930000011	Single Facility		516
361105	BARSTOW COMMUNITY HOSPITAL	92311	240000110	Single Facility		3,073
090793	BARTON MEMORIAL HOSPITAL	96150	30000013	Single Facility		3,930
361110	BEAR VALLEY COMMUNITY HOSPITAL	92315	240000111	Single Facility		352
190066	BELLFLOWER MEDICAL CENTER	90706	930000015	Single Facility		6,233
330120	BETTY FORD CENTER AT EISENHOWER, THE	92270	250000049	Single Facility		900
190081	BEVERLY HOSPITAL	90640	930000389	Single Facility		12,428
190020	BHC ALHAMBRA HOSPITAL	91770	930000006	Single Facility		2,808
040802	BIGGS GRIDLEY MEMORIAL HOSPITAL	95948	230000007	Single Facility		906
301126	BREA COMMUNITY HOSPITAL	92621	60000204	Single Facility		2,809
190110	BROTMAN MEDICAL CENTER	90231	930000022	Single Facility		9,155
044006	BUTTE COUNTY PHF	95926	MH1019001	Single Facility		1,243
190125	CALIFORNIA HOSPITAL MEDICAL CENTER - LOS ANGELES	90015	930000024	Single Facility		17,136
380929	CALIFORNIA PACIFIC MEDICAL CENTERS	94115	220000197	Consolidated	4	35,509
481015	CALIFORNIA SPECIALTY HOSPITAL	94590	110000042	Single Facility		2,089
364050	CANYON RIDGE HOSPITAL	91710	240000357	Single Facility		3,437
190137	CASA COLINA HOSPITAL FOR REHAB MEDICINE	91767	930000026	Single Facility		874
190555	CEDARS SINAI MEDICAL CENTER	90048	930000110	Single Facility		53,060
190148	CENTINELA HOSPITAL MEDICAL CENTER	90301	930000027	Single Facility		17,560
160787	CENTRAL VALLEY GENERAL HOSPITAL	93230	40000140	Single Facility		5,393
190155	CENTURY CITY HOSPITAL	90067	930000029	Single Facility		5,366
301140	CHAPMAN MEDICAL CENTER	92669	60000097	Single Facility		2,866
370673	CHILDREN'S HOSPITAL - SAN DIEGO	92123	80000028	Single Facility		12,712
010776	CHILDRENS HOSPITAL & RESEARCH CTR AT OAKLAND	94609	140000015	Single Facility		9,278
304113	CHILDREN'S HOSPITAL AT MISSION	92691	60000348	Single Facility		1,956
204019	CHILDREN'S HOSPITAL CENTRAL CALIFORNIA	93638	40000160	Single Facility		12,203
190170	CHILDREN'S HOSPITAL OF LOS ANGELES	90027	930000032	Single Facility		10,994
300032	CHILDREN'S HOSPITAL OF ORANGE COUNTY	92668	60000011	Single Facility		10,009
434051	CHILDRENS RECOVERY CTR OF NORTHERN CALIFORNIA	95008	70000320	Single Facility		29
382715	CHINESE HOSPITAL	94133	220000122	Single Facility		2,222
361144	CHINO VALLEY MEDICAL CENTER	91710	240000125	Single Facility		6,882
200692	CHOWCHILLA DISTRICT MEMORIAL HOSPITAL	93610	40000083	Single Facility		70

APPENDIX F
HOSPITAL LOCATION LISTING
Calendar Year 2003

See footnotes on last page.

OSHPD ID Number	Facility Name	Zip Code	DHS/DMH* License Number	Level of Data Aggregation**	Number of Consolidated Locations***	Total Discharges
190413	CITRUS VALLEY MEDICAL CENTER - IC CAMPUS	91723	930000131	Satellite Facility		9,231
190636	CITRUS VALLEY MEDICAL CENTER - QV CAMPUS	91790	930000131	Parent Facility		22,150
190661	CITY OF ANGELS MEDICAL CTR-DOWNTOWN CAMPUS	90026	930000137	Parent Facility		2,821
190410	CITY OF ANGELS MEDICAL CTR-INGLESIDE CAMPUS	91770	930000137	Satellite Facility		3,038
190176	CITY OF HOPE NATIONAL MEDICAL CENTER	91010	930000033	Single Facility		4,347
100697	COALINGA REGIONAL MEDICAL CENTER	93210	40000085	Single Facility		639
190766	COAST PLAZA DOCTORS HOSPITAL	90650	930000162	Single Facility		4,997
301258	COASTAL COMMUNITIES HOSPITAL	92704	60000143	Single Facility		8,351
190184	COLLEGE HOSPITAL	90701	930000036	Single Facility		7,142
301155	COLLEGE HOSPITAL COSTA MESA	92627	60000100	Single Facility		5,230
361458	COLORADO RIVER MEDICAL CENTER	92363	240000227	Single Facility		2,461
060870	COLUSA REGIONAL MEDICAL CENTER	95932	230000149	Single Facility		1,180
190197	COMMUNITY & MISSION HOSPITALS	90255	930000038	Consolidated	2	8,573
270744	COMMUNITY HOSPITAL MONTEREY PENINSULA	93940	70000026	Single Facility		13,878
190196	COMMUNITY HOSPITAL OF GARDENA	90247	930000037	Single Facility		1,239
190475	COMMUNITY HOSPITAL OF LONG BEACH	90804	930000090	Single Facility		2,754
430743	COMMUNITY HOSPITAL OF LOS GATOS	95030	70000025	Single Facility		7,238
361323	COMMUNITY HOSPITAL OF SAN BERNARDINO	92411	240000198	Single Facility		13,287
100005	COMMUNITY MEDICAL CENTER - CLOVIS	93612	40000004	Single Facility		12,077
100717	COMMUNITY MEDICAL CENTER - FRESNO	93721	40000096	Parent Facility		28,397
560473	COMMUNITY MEMORIAL HOSP-SAN BUENAVENTURA	93003	50000026	Single Facility		17,105
374094	CONTINENTAL REHABILITATION HOSP OF SAN DIEGO	92103	90000404	Single Facility		695
070924	CONTRA COSTA REGIONAL MEDICAL CENTER	94553	140000090	Single Facility		10,959
160702	CORCORAN DISTRICT HOSPITAL	93212	40000087	Single Facility		577
331152	CORONA REGIONAL MEDICAL CENTERS	92882	250000126	Consolidated	2	11,280
390846	DAMERON HOSPITAL	95203	30000024	Single Facility		15,792
190500	DANIEL FREEMAN MARINA HOSPITAL	90291	930000096	Single Facility		2,841
190230	DANIEL FREEMAN MEMORIAL HOSPITAL	90301	930000044	Single Facility		12,102
190232	DEL AMO HOSPITAL	90505	930000045	Single Facility		2,443
150706	DELANO REGIONAL MEDICAL CENTER	93215	50000180	Single Facility		5,379
331164	DESERT REGIONAL MEDICAL CENTER	92262	250000139	Single Facility		19,803
364144	DESERT VALLEY HOSPITAL	92392	240000562	Single Facility		6,106
361166	DOCTORS' HOSPITAL MEDICAL CTR OF MONTCLAIR	91763	240000141	Single Facility		7,343
392287	DOCTORS HOSPITAL OF MANTECA	95336	30000203	Single Facility		4,475
190857	DOCTORS HOSPITAL OF WEST COVINA, INC	91790	930000188	Single Facility		368
500852	DOCTORS MEDICAL CENTER	95350	30000026	Parent Facility		24,288
070904	DOCTORS MEDICAL CENTERS, SAN PABLO & PINOLE	94806	110000485	Consolidated	2	8,494
440755	DOMINICAN SANTA CRUZ HOSPITALS	95065	70000030	Consolidated	2	13,909
240853	DOS PALOS MEMORIAL HOSPITAL	93620	40000168	Single Facility		25
190243	DOWNEY REGIONAL MEDICAL CENTER	90241	930000048	Parent Facility		12,307
196168	EARL & LORRAINE MILLER CHILDRENS HOSPITAL	90806	930000949	Single Facility		8,280
190256	EAST LOS ANGELES DOCTORS HOSPITAL	90023	930000049	Single Facility		4,484
190328	EAST VALLEY HOSPITAL MEDICAL CENTER	91740	930000060	Single Facility		3,769
320859	EASTERN PLUMAS HEALTH CARE	96122	230000014	Single Facility		526
461024	EASTERN PLUMAS HOSPITAL-LOYALTON CAMPUS	96118	230000150	Single Facility		93
010805	EDEN MEDICAL CENTER & LAUREL GROVE HOSPITAL	94546	140000030	Consolidated	3	11,359
331168	EISENHOWER MEMORIAL HOSPITAL	92270	250000142	Single Facility		17,384
430763	EL CAMINO HOSPITAL	94040	220000408	Single Facility		20,929
130699	EL CENTRO REGIONAL MEDICAL CENTER	92243	90000004	Single Facility		8,019
094002	EL DORADO COUNTY P H F	95667	MH1015002	Single Facility		346
190685	ELASTAR COMMUNITY HOSPITAL	90022	930000145	Single Facility		3,766
500867	EMANUEL MEDICAL CENTER, INC	95380	30000035	Single Facility		11,293
190280	ENCINO-TARZANA REGIONAL MED CTR-ENCINO	91436	930000051	Single Facility		3,871
190517	ENCINO-TARZANA REGIONAL MED CTR-TARZANA	91356	930000097	Single Facility		16,760
040962	ENLOE MEDICAL CENTERS	95926	230000027	Consolidated	3	17,231
474007	FAIRCHILD MEDICAL CENTER	96097	230000035	Single Facility		2,152

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370705	FALLBROOK HOSPITAL DISTRICT	92028	80000005	Single Facility		3,277
040875	FEATHER RIVER HOSPITAL	95969	230000017	Single Facility		5,208
190298	FOOTHILL PRESBYTERIAN HOSP-JOHNSTON MEMORIAL	91741	930000052	Single Facility		6,542
301175	FOUNTAIN VALLEY RGNL HOSPS & MED CTRS	92708	60000109	Consolidated	2	22,565
230949	FRANK R HOWARD MEMORIAL HOSPITAL	95490	110000013	Single Facility		1,025
014034	FREMONT HOSPITAL	94538	140000347	Single Facility		2,870
510882	FREMONT MEDICAL CENTERS	95991	230000130	Consolidated	2	9,091
400480	FRENCH HOSPITAL MEDICAL CENTER	93401	50000031	Single Facility		4,637
104089	FRESNO COUNTY PSYCHIATRIC HEALTH FACILITY	93702	MH1016028	Single Facility		651
105029	FRESNO HEART HOSPITAL	93720	40000551	Single Facility		276
104047	FRESNO SURGERY CENTER	93710	40000332	Single Facility		2,055
301283	GARDEN GROVE HOSPITAL & MEDICAL CENTER	92643	60000152	Single Facility		9,852
190315	GARFIELD MEDICAL CENTER	91754	930000057	Single Facility		15,625
190317	GATEWAYS HOSPITAL & MENTAL HEALTH CENTER	90026	930000058	Single Facility		591
270777	GEORGE L MEE MEMORIAL HOSPITAL	93930	70000047	Single Facility		2,473
190323	GLENDALE ADVENTIST MEDICAL CTR - WILSON TERRACE	91206	930000059	Single Facility		18,081
190522	GLENDALE MEMORIAL HOSPITAL & HEALTH CENTER	91204	930000099	Single Facility		17,536
110889	GLENN MEDICAL CENTER	95988	230000018	Single Facility		140
420483	GOLETA VALLEY COTTAGE HOSPITAL	93111	50000034	Single Facility		2,114
430779	GOOD SAMARITAN & MISSION OAKS HOSPITALS	95124	70000048	Consolidated	2	18,566
150775	GOOD SAMARITAN HOSPITAL-BAKERSFIELD	93308	120000146	Single Facility		2,513
190392	GOOD SAMARITAN HOSPITAL-LOS ANGELES	90017	930000071	Single Facility		20,159
190348	GRANADA HILLS COMMUNITY HOSPITAL	91344	930000062	Single Facility		2,724
190352	GREATER EL MONTE COMMUNITY HOSPITAL	91733	930000063	Single Facility		5,624
370714	GROSSMONT HOSPITAL	91942	80000006	Single Facility		25,808
160725	HANFORD COMMUNITY MEDICAL CENTER	93230	40000102	Single Facility		4,049
350784	HAZEL HAWKINS MEMORIAL HOSPITAL	95023	70000004	Single Facility		3,413
490964	HEALDSBURG DISTRICT HOSPITAL	95448	110000019	Single Facility		704
304159	HEALTHBRIDGE CHILDREN'S HOSPITAL-ORANGE	92866	60000530	Single Facility		67
154022	HEALTHSOUTH BAKERSFIELD REHABILITATION HOSPITAL	93309	50000248	Single Facility		1,237
304079	HEALTHSOUTH TUSTIN REHABILITATION HOSPITAL	92680	60000303	Single Facility		982
380842	HEBREW HOME FOR THE AGED DISABLED/APH	94112	220000224	Single Facility		328
331194	HEMET VALLEY MEDICAL CENTER	92543	250000145	Single Facility		16,716
190949	HENRY MAYO NEWHALL MEMORIAL HOSPITAL	91355	930000206	Single Facility		11,788
344021	HERITAGE OAKS HOSPITAL	95841	30000357	Single Facility		2,653
362041	HI-DESERT MEDICAL CENTER	92252	240000231	Single Facility		3,168
301205	HOAG MEMORIAL HOSPITAL PRESBYTERIAN	92663	60000122	Single Facility		29,269
190380	HOLLYWOOD COMMUNITY HOSPITAL OF HOLLYWOOD	90028	930000066	Parent Facility		1,280
190814	HOLLYWOOD COMMUNITY HOSPITAL OF VAN NUYS	91401	930000066	Satellite Facility		1,950
301209	HUNTINGTON BEACH HOSPITAL	92647	60000124	Single Facility		4,563
190400	HUNTINGTON MEMORIAL HOSPITAL	91105	930000372	Single Facility		28,692
320874	INDIAN VALLEY HOSPITAL	95947	230000016	Single Facility		157
304045	IRVINE REGIONAL HOSPITAL AND MEDICAL CENTER	92718	60000275	Single Facility		11,874
121031	JEROLD PHELPS COMMUNITY HOSPITAL	95542	110000052	Single Facility		127
220733	JOHN C FREMONT HEALTHCARE DISTRICT	95338	40000108	Single Facility		417
331216	JOHN F KENNEDY MEMORIAL HOSPITAL	92201	250000155	Single Facility		11,804
070988	JOHN MUIR MEDICAL CENTER	94598	140000265	Single Facility		20,174
190431	KAISER FDN HOSPS - HARBOR CITY & CARSON	90710	930000079	Consolidated	2	14,527
301132	KAISER FND HOSP - ANAHEIM	92807	60000091	Single Facility		15,128
196035	KAISER FND HOSP - BALDWIN PARK	91706	930000920	Single Facility		16,298
190430	KAISER FND HOSP - BELLFLOWER	90706	930000078	Single Facility		21,567
361223	KAISER FND HOSP - FONTANA	92335	240000159	Single Facility		26,067
014132	KAISER FND HOSP - FREMONT	94538	140000053	Satellite Facility		4,093
104062	KAISER FND HOSP - FRESNO	93720	40000384	Single Facility		9,453
380857	KAISER FND HOSP - GEARY S F	94115	220000188	Parent Facility		15,721
010858	KAISER FND HOSP - HAYWARD	94545	140000053	Parent Facility		15,389

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190646	KAISER FND HOSP - MENTAL HEALTH CENTER	90012	930000077	Satellite Facility		2,133
010856	KAISER FND HOSP - OAKLAND CAMPUS	94611	140000052	Parent Facility		12,620
190432	KAISER FND HOSP - PANORAMA CITY	91402	930000080	Single Facility		14,732
364110	KAISER FND HOSP - PERMANENTE CHEM DEP PROGRAM	92335	240000488	Single Facility		628
410804	KAISER FND HOSP - REDWOOD CITY	94063	220000021	Single Facility		9,861
480989	KAISER FND HOSP - REHABILITATION CENTER VALLEJO	94590	110000026	Single Facility		17,572
334025	KAISER FND HOSP - RIVERSIDE	92505	250000327	Single Facility		18,575
340913	KAISER FND HOSP - SACRAMENTO	95825	300000052	Parent Facility		21,012
370730	KAISER FND HOSP - SAN DIEGO	92120	800000062	Parent Facility		30,547
210992	KAISER FND HOSP - SAN RAFAEL	94903	10000357	Single Facility		5,849
430805	KAISER FND HOSP - SANTA CLARA	95051	70000661	Single Facility		21,050
494019	KAISER FND HOSP - SANTA ROSA	95403	110000213	Single Facility		9,717
431506	KAISER FND HOSP - SANTA TERESA COMM HOSPITAL	95119	70000117	Single Facility		16,164
342344	KAISER FND HOSP - SOUTH SACRAMENTO	95823	30000228	Single Facility		16,134
410806	KAISER FND HOSP - SOUTH SAN FRANCISCO	94080	220000022	Single Facility		6,232
190429	KAISER FND HOSP - SUNSET	90027	930000077	Parent Facility		23,036
314024	KAISER FND HOSP - VALLEY MEDICAL CENTER	95661	30000052	Satellite Facility		9,777
070990	KAISER FND HOSP - WALNUT CREEK	94596	140000290	Parent Facility		21,999
190434	KAISER FND HOSP - WEST LA	90034	930000081	Single Facility		12,231
191450	KAISER FND HOSP - WOODLAND HILLS	91367	930000358	Single Facility		14,129
074093	KAISER FNDN HOSP - RICHMOND CAMPUS	94804	140000052	Satellite Facility		3,026
540734	KAWEAH DELTA DISTRICT HOSPITAL	93291	40000109	Parent Facility		24,540
190150	KEDREN COMMUNITY MENTAL HEALTH CENTER	90011	930000028	Single Facility		979
210993	KENTFIELD REHABILITATION HOSPITAL	94904	10000358	Single Facility		497
150736	KERN MEDICAL CENTER	93305	50000182	Single Facility		16,997
150737	KERN VALLEY HEALTHCARE DISTRICT	93240	120000183	Single Facility		1,009
190305	KINDRED HOSPITAL - LOS ANGELES	90056	930000053	Single Facility		475
344035	KINDRED HOSPITAL - SACRAMENTO	95630	30000377	Single Facility		212
370721	KINDRED HOSPITAL - SAN DIEGO	92104	90000059	Single Facility		560
010887	KINDRED HOSPITAL - SAN FRANCISCO BAY AREA	94577	140000066	Single Facility		439
301127	KINDRED HOSPITAL BREA	92621	60000407	Single Facility		412
361274	KINDRED HOSPITAL ONTARIO	91764	240000561	Single Facility		778
301380	KINDRED HOSPITAL WESTMINSTER	92683	60000183	Single Facility		641
190449	KINDRED HOSPITALS	90637	930000084	Consolidated	3	2,132
100745	KINGSBURG MEDICAL CENTER	93631	40000116	Single Facility		883
331226	KNOLLWOOD PSYCHIATRIC & CHEMICAL DEPENDENCY CT	92506	250000476	Single Facility		920
194981	LA CASA PSYCHIATRIC HEALTH FACILITY	90805	MH2014031	Single Facility		120
301234	LA PALMA INTERCOMMUNITY HOSPITAL	90623	60000136	Single Facility		5,319
191306	LAC/RANCHO LOS AMIGOS NATIONAL REHAB CENTER	90242	60000161	Single Facility		2,599
380865	LAGUNA HONDA HOSPITAL & REHABILITATION CENTER	94116	220000040	Single Facility		1,194
190240	LAKEWOOD REGIONAL MEDICAL CENTER - SOUTH STREET	90712	930000046	Parent Facility		11,028
190455	LANCASTER COMMUNITY HOSPITAL	93534	930000085	Single Facility		5,898
380868	LANGLEY PORTER PSYCHIATRIC INSTITUTE	94143	220000377	Single Facility		812
180919	LASSEN COMMUNITY HOSPITAL INC	96130	230000020	Single Facility		494
190468	LINCOLN HOSPITAL MEDICAL CENTER	90033	930000088	Single Facility		407
190470	LITTLE COMPANY OF MARY HOSPITAL	90503	930000089	Single Facility		21,353
190680	LITTLE COMPANY OF MARY HOSPITALS	90732	930000142	Consolidated	3	8,817
390923	LODI MEMORIAL HOSPITAL	95240	30000056	Parent Facility		8,691
364014	LOMA LINDA UNIVERSITY BEHAVIORAL MEDICINE CENTER	92373	240000281	Single Facility		4,537
361246	LOMA LINDA UNIVERSITY MEDICAL CENTERS	92354	240000169	Consolidated	2	33,244
420491	LOMPOC HEALTHCARE DISTRICT	93436	50000038	Single Facility		3,155
190525	LONG BEACH MEMORIAL MEDICAL CENTER	90806	930000102	Single Facility		37,490
301248	LOS ALAMITOS MEDICAL CENTER	90720	60000142	Single Facility		10,050
191227	LOS ANGELES CO HARBOR-UCLA MEDICAL CENTER	90502	60000129	Single Facility		22,573
191261	LOS ANGELES CO HIGH DESERT HOSPITAL	93536	60000145	Single Facility		608
191230	LOS ANGELES CO MARTIN LUTHER KING JR/DREW MED CT	90059	60000132	Single Facility		13,473

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191228	LOS ANGELES CO USC MEDICAL CENTER	90033	60000130	Single Facility		39,135
190198	LOS ANGELES COMMUNITY HOSPITAL	90023	930000039	Parent Facility		4,280
191231	LOS ANGELES COUNTY OLIVE VIEW-UCLA MEDICAL CENTE	91342	60000133	Single Facility		13,458
190854	LOS ANGELES METROPOLITAN MEDICAL CENTERS	90018	930000187	Consolidated	2	7,058
560492	LOS ROBLES REGIONAL MEDICAL CENTERS	91360	50000039	Consolidated	2	16,272
434040	LUCILE SALTER PACKARD CHILDREN'S HOSP AT STANFORD	94304	70000659	Single Facility		17,246
121002	MAD RIVER COMMUNITY HOSPITAL	95521	110000031	Single Facility		3,018
201281	MADERA COMMUNITY HOSPITAL	93637	40000191	Single Facility		6,631
260011	MAMMOTH HOSPITAL	93546	240000008	Single Facility		749
420493	MARIAN MEDICAL CENTER	93454	50000040	Single Facility		13,981
244027	MARIE GREEN PSYCHIATRIC CENTER - P H F	95340	MH1016088	Single Facility		770
211006	MARIN GENERAL HOSPITAL	94904	110000361	Single Facility		13,103
050932	MARK TWAIN ST. JOSEPH'S HOSPITAL	95249	30000058	Single Facility		2,026
090933	MARSHALL MEDICAL CENTER	95667	30000059	Single Facility		6,577
450936	MAYERS MEMORIAL HOSPITAL	96028	230000021	Single Facility		656
240924	MEMORIAL HOSPITAL LOS BANOS	93635	40000177	Single Facility		2,742
500939	MEMORIAL HOSPITAL MEDICAL CENTER - MODESTO	95355	30000061	Single Facility		19,749
190521	MEMORIAL HOSPITAL OF GARDENA	90247	930000098	Single Facility		4,718
231013	MENDOCINO COAST DISTRICT HOSPITAL	95437	110000040	Single Facility		2,081
334018	MENIFEE VALLEY MEDICAL CENTER	92585	250000338	Single Facility		5,216
414018	MENLO PARK SURGICAL HOSPITAL	94025	220000276	Single Facility		349
340947	MERCY GENERAL HOSPITAL	95819	30000062	Single Facility		19,863
344029	MERCY HOSPITAL - FOLSOM	95630	30000372	Single Facility		5,193
150761	MERCY HOSPITALS - BAKERSFIELD	93301	120000184	Consolidated	2	14,981
450949	MERCY MEDICAL CENTER	96001	230000024	Single Facility		14,942
240942	MERCY MEDICAL CENTER MERCED-COMMUNITY CAMPUS	95340	40000178	Single Facility		10,401
240948	MERCY MEDICAL CENTER MERCED-DOMINICAN CAMPUS	95340	40000181	Single Facility		3,204
470871	MERCY MEDICAL CENTER MT. SHASTA	96067	230000015	Single Facility		1,879
340950	MERCY SAN JUAN HOSPITAL	95608	30000063	Parent Facility		19,495
150830	MERCY WESTSIDE HOSPITAL	93268	50000189	Single Facility		185
340951	METHODIST HOSPITAL OF SACRAMENTO	95823	30000064	Single Facility		8,513
190529	METHODIST HOSPITAL OF SOUTHERN CALIFORNIA	91007	930000103	Single Facility		16,636
190534	MIDWAY HOSPITAL MEDICAL CENTER	90019	930000105	Single Facility		5,253
410852	MILLS-PENINSULA MEDICAL CENTERS	94010	220000037	Consolidated	3	18,942
190524	MISSION COMMUNITY HOSPITALS	91402	930000101	Consolidated	2	5,737
301262	MISSION HOSPITAL REGIONAL MEDICAL CENTER	92691	60000146	Single Facility		18,691
500954	MODESTO REHABILITATION HOSPITAL	95354	30000464	Single Facility		1,291
250956	MODOC MEDICAL CENTER	96101	230000026	Single Facility		342
190541	MONROVIA COMMUNITY HOSPITAL	91016	930000107	Single Facility		1,231
190547	MONTEREY PARK HOSPITAL	91754	930000108	Single Facility		9,226
334048	MORENO VALLEY COMMUNITY HOSPITAL	92555	250000398	Single Facility		6,620
190552	MOTION PICTURE & TELEVISION HOSPITAL	91364	930000109	Single Facility		1,355
361266	MOUNTAINS COMMUNITY HOSPITAL	92352	240000176	Single Facility		635
013687	MPI CHEMICAL DEPENDENCY RECOVERY HOSPITAL	94609	20000232	Single Facility		500
071018	MT. DIABLO MEDICAL CENTER	94520	140000128	Single Facility		9,440
074039	MT. DIABLO MEDICAL PAVILION	94520	140000418	Single Facility		2,542
281297	N M HOLDERMAN MEMORIAL HOSPITAL (VET'S HOME OF C)	94599	110000090	Single Facility		768
274043	NATIVIDAD MEDICAL CENTER - CONSTITUTION BLVD	93906	70000070	Single Facility		11,070
301304	NEWPORT BAY HOSPITAL	92663	60000160	Single Facility		726
481357	NORTH BAY MEDICAL CENTER	94533	110000093	Parent Facility		7,015
484001	NORTH BAY VACAVALLEY HOSPITAL	95687	110000093	Satellite Facility		2,616
454012	NORTHERN CALIFORNIA REHABILITATION HOSPITAL	96001	230000191	Single Facility		1,330
141273	NORTHERN INYO HOSPITAL	93514	240000179	Single Facility		1,140
190568	NORTHRIDGE HOSPITAL MEDICAL CENTER	91328	930000114	Single Facility		18,188
190810	NORTHRIDGE HOSPITAL MEDICAL CENTER - SHERMAN WA	91405	930000169	Single Facility		11,362
190570	NORWALK COMMUNITY HOSPITAL	90650	930000039	Satellite Facility		1,420

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214034	NOVATO COMMUNITY HOSPITAL - ROLAND WAY	94945	110000375	Single Facility		1,970
500967	OAK VALLEY DISTRICT HOSPITAL (2-RH)	95361	30000069	Single Facility		2,608
334457	OASIS PSYCHIATRIC HEALTH FACILITY	92201	MH2016032	Single Facility		711
430837	O'CONNOR HOSPITAL - SAN JOSE	95128	70000072	Single Facility		15,236
560501	OJAI VALLEY COMMUNITY HOSPITAL	93023	50000045	Single Facility		1,485
300225	ORANGE COAST MEMORIAL MEDICAL CENTER	92708	60000066	Single Facility		10,180
301242	ORANGE COUNTY COMMUNITY HOSPITALS	90620	60000140	Consolidated	2	870
040937	OROVILLE HOSPITAL	95966	230000022	Single Facility		8,359
190581	ORTHOPAEDIC HOSPITAL	90007	930000116	Single Facility		1,596
190307	PACIFIC ALLIANCE MEDICAL CENTER, INC.	90012	930000054	Single Facility		7,873
190587	PACIFIC HOSPITALS OF LONG BEACH	90806	930000117	Consolidated	2	6,414
560838	PACIFIC SHORES HOSPITAL	93030	50000231	Single Facility		290
190696	PACIFICA HOSPITAL OF THE VALLEY	91352	930000148	Single Facility		6,553
491338	PALM DRIVE HOSPITAL	95472	110000091	Single Facility		1,291
331288	PALO VERDE HOSPITAL	92225	250000184	Single Facility		1,821
370755	PALOMAR MEDICAL CENTER	92025	80000083	Single Facility		24,126
370759	PARADISE VALLEY HOSPITAL	91950	90000086	Consolidated	2	14,340
331293	PARKVIEW COMMUNITY HOSPITAL MEDICAL CENTER	92503	250000186	Single Facility		8,432
454013	PATIENTS' HOSPITAL OF REDDING	96001	230000195	Single Facility		466
491001	PETALUMA VALLEY HOSPITAL	94954	110000001	Single Facility		4,327
190605	PINE GROVE HOSPITAL	91307	930000190	Single Facility		88
130760	PIONEERS MEMORIAL HOSPITAL	92227	90000087	Single Facility		7,204
301297	PLACENTIA LINDA HOSPITAL	92670	60000157	Single Facility		5,237
320986	PLUMAS DISTRICT HOSPITAL	95971	230000030	Single Facility		722
370977	POMERADO HOSPITAL	92064	80000127	Single Facility		8,860
190630	POMONA VALLEY HOSPITAL MEDICAL CENTER	91767	930000128	Single Facility		27,014
190631	PRESBYTERIAN INTERCOMMUNITY HOSPITAL	90602	930000129	Single Facility		20,430
190385	PROVIDENCE HOLY CROSS MEDICAL CENTER	91345	930000404	Single Facility		15,396
190758	PROVIDENCE SAINT JOSEPH MEDICAL CENTER	91505	930000159	Single Facility		22,448
190382	QUEEN OF ANGELS/HOLLYWOOD PRESBYTERIAN MED CEN	90027	930000067	Single Facility		19,009
281047	QUEEN OF THE VALLEY HOSPITAL - NAPA	94558	110000060	Single Facility		8,502
171049	REDBUD COMMUNITY HOSPITAL	95422	110000174	Single Facility		1,984
450940	REDDING MEDICAL CENTER	96001	230000023	Single Facility		7,453
361308	REDLANDS COMMUNITY HOSPITAL	92373	240000191	Single Facility		14,057
121051	REDWOOD MEMORIAL HOSPITAL	95540	110000173	Single Facility		2,228
430705	REGIONAL MEDICAL OF SAN JOSE	95116	70000005	Single Facility		13,095
424047	REHABILITATION INSTITUTE AT SANTA BARBARA	93105	50000108	Single Facility		656
580996	RIDEOUT MEMORIAL HOSPITAL	95901	230000126	Single Facility		6,756
150782	RIDGECREST REGIONAL HOSPITAL	93555	120000186	Single Facility		3,209
331312	RIVERSIDE COMMUNITY HOSPITAL	92501	250000194	Single Facility		21,210
334487	RIVERSIDE COUNTY REGIONAL MEDICAL CENTERS	92555	250000195	Consolidated	2	19,695
190366	ROBERT F. KENNEDY MEDICAL CENTER	90250	930000065	Single Facility		7,677
014113	S.T.A.R.S. - P H F	94578	MH2016030	Single Facility		123
344011	SACRAMENTO COUNTY MENTAL HEALTH TREATMENT CEN	95817	MH1082011	Single Facility		2,522
301317	SADDLEBACK MEMORIAL MEDICAL CENTER	92653	60000166	Single Facility		18,140
270875	SALINAS VALLEY MEMORIAL HOSPITAL	93901	70000083	Single Facility		14,185
361318	SAN ANTONIO COMMUNITY HOSPITAL	91786	240000196	Single Facility		17,887
301325	SAN CLEMENTE HOSPITAL & MEDICAL CENTER	92673	60000167	Single Facility		3,158
374055	SAN DIEGO COUNTY PSYCHIATRIC HOSPITAL	92110	90000092	Single Facility		1,055
374084	SAN DIEGO HOSPICE AND PALLIATIVE CARE-ACUTE CARE	92103	80000392	Single Facility		1,071
190673	SAN DIMAS COMMUNITY HOSPITAL	91773	930000139	Single Facility		4,537
380939	SAN FRANCISCO GENERAL HOSPITAL	94110	220000063	Single Facility		17,791
190200	SAN GABRIEL VALLEY MEDICAL CENTER	91776	930000041	Single Facility		12,261
331326	SAN GORGONIO MEMORIAL HOSPITAL	92220	250000199	Single Facility		3,619
150788	SAN JOAQUIN COMMUNITY HOSPITAL	93301	120000187	Single Facility		9,687
394003	SAN JOAQUIN COUNTY P.H.F.	95202	MH1040012	Single Facility		1,562

APPENDIX F
HOSPITAL LOCATION LISTING
Calendar Year 2003

See footnotes on last page.

OSHPD ID Number	Facility Name	Zip Code	DHS/DMH* License Number	Level of Data Aggregation**	Number of Consolidated Locations***	Total Discharges
391010	SAN JOAQUIN GENERAL HOSPITAL	95231	30000087	Single Facility		11,400
104023	SAN JOAQUIN VALLEY REHABILITATION HOSPITAL	93720	40000280	Single Facility		954
430879	SAN JOSE MEDICAL CENTER	95112	70000084	Single Facility		7,066
013619	SAN LEANDRO HOSPITAL	94578	20000184	Single Facility		5,291
404046	SAN LUIS OBISPO CO PSYCHIATRIC HEALTH FACILITY	93401	MH2016035	Single Facility		555
400511	SAN LUIS OBISPO GENERAL HOSPITAL	93401	50000050	Single Facility		1,072
410782	SAN MATEO MEDICAL CENTER	94403	220000015	Parent Facility		3,494
410752	SAN MATEO MEDICAL CENTER LONG TERM CARE SERVICE	94402	220000015	Satellite Facility		226
074017	SAN RAMON REGIONAL MEDICAL CENTER	94583	140000345	Parent Facility		6,532
190681	SAN VICENTE HOSPITAL	90036	930000143	Single Facility		170
301314	SANTA ANA HOSPITAL MEDICAL CENTER INC	92706	60000163	Single Facility		1,227
420514	SANTA BARBARA COTTAGE HOSPITALS	93105	50000140	Consolidated	2	20,744
424002	SANTA BARBARA COUNTY P.H.F.	93110	MH1016014	Single Facility		495
430883	SANTA CLARA VALLEY MEDICAL CENTER	95128	70000085	Single Facility		27,314
190687	SANTA MONICA - UCLA MEDICAL CENTER	90404	930000146	Single Facility		11,643
560521	SANTA PAULA MEMORIAL HOSPITAL	93060	50000056	Single Facility		1,538
491064	SANTA ROSA MEMORIAL HOSPITALS	95405	140000648	Consolidated	3	15,142
190691	SANTA TERESITA HOSPITAL	91010	930000147	Single Facility		3,019
420522	SANTA YNEZ VALLEY COTTAGE HOSPITAL	93463	50000057	Single Facility		319
371256	SCRIPPS GREEN HOSPITAL	92037	80000139	Single Facility		10,170
370658	SCRIPPS MEMORIAL HOSPITAL - CHULA VISTA	91910	90000018	Single Facility		11,538
371394	SCRIPPS MEMORIAL HOSPITAL - ENCINITAS	92024	80000148	Single Facility		8,999
370771	SCRIPPS MEMORIAL HOSPITAL - LA JOLLA	92037	80000050	Single Facility		23,271
370744	SCRIPPS MERCY HOSPITAL	92103	90000074	Single Facility		23,920
100793	SELMA COMMUNITY HOSPITAL	93662	40000146	Single Facility		4,161
124004	SEMPERVIRENS P.H.F.	95501	MH1016003	Single Facility		513
321016	SENECA HEALTHCARE DISTRICT	96020	230000032	Single Facility		362
410891	SEQUOIA HOSPITAL	94062	220000045	Single Facility		9,852
410817	SETON MEDICAL CENTER	94015	220000026	Single Facility		9,948
410828	SETON MEDICAL CENTER - COASTSIDE	94038	220000200	Single Facility		114
370693	SHARP CABRILLO HOSPITAL	92110	80000039	Satellite Facility		1,084
370875	SHARP CHULA VISTA MEDICAL CENTER	91911	90000008	Single Facility		15,289
370689	SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER	92118	90000036	Single Facility		2,170
370695	SHARP MARY BIRCH HOSPITAL FOR WOMEN	92123	80000615	Single Facility		16,439
370694	SHARP MEMORIAL HOSPITAL	92123	80000039	Parent Facility		17,407
370745	SHARP MEMORIAL HOSPITAL D/P APH	92123	80000039	Satellite Facility		5,028
374049	SHARP VISTA PACIFICA	92111	80000319	Single Facility		248
451019	SHASTA COUNTY P H F	96001	MH1015017	Single Facility		939
190708	SHERMAN OAKS HOSPITAL AND HEALTH CENTER	91403	930000149	Single Facility		5,247
190712	SHRINERS HOSPITAL FOR CRIPPLED CHILDREN - L.A.	90020	930000150	Single Facility		1,347
344114	SHRINERS HOSPITALS FOR CHILDREN NORTHERN CALIF.	95817	30000620	Single Facility		1,291
100797	SIERRA KINGS DISTRICT HOSPITAL	93654	40000149	Single Facility		3,754
291023	SIERRA NEVADA MEMORIAL HOSPITAL	95945	230000152	Single Facility		7,890
540798	SIERRA VIEW DISTRICT HOSPITAL	93257	40000150	Single Facility		9,685
342392	SIERRA VISTA HOSPITAL	95823	30000290	Single Facility		2,433
400524	SIERRA VISTA REGIONAL MEDICAL CENTER	93405	50000059	Single Facility		7,476
560525	SIMI VALLEY HOSPITALS & HEALTH CARE SERVICES	93065	50000216	Consolidated	2	7,224
491076	SONOMA VALLEY HOSPITAL	95476	110000072	Single Facility		2,528
551034	SONORA COMMUNITY HOSPITALS	95370	30000094	Consolidated	4	4,614
301337	SOUTH COAST MEDICAL CENTER	92677	60000171	Single Facility		5,528
141338	SOUTHERN INYO HOSPITAL	93545	240000205	Single Facility		114
334068	SOUTHWEST HEALTHCARE SYSTEM	92362	250000262	Consolidated	2	18,172
100899	ST. AGNES MEDICAL CENTER	93710	40000173	Single Facility		26,550
361339	ST. BERNARDINE MEDICAL CENTER	92404	240000206	Single Facility		18,264
394009	ST. DOMINIC'S HOSPITAL	95336	30000393	Single Facility		2,375
521041	ST. ELIZABETH COMMUNITY HOSPITAL	96080	230000036	Single Facility		4,440

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OSHPD ID Number	Facility Name	Zip Code	DHS/DMH* License Number	Level of Data Aggregation**	Number of Consolidated Locations***	Total Discharges
190754	ST. FRANCIS MEDICAL CENTER	90262	930000157	Single Facility		24,636
420528	ST. FRANCIS MEDICAL CENTER OF SANTA BARBARA	93103	50000063	Single Facility		827
380960	ST. FRANCIS MEMORIAL HOSPITAL	94109	220000069	Single Facility		7,248
281078	ST. HELENA HOSPITAL	94576	110000073	Single Facility		5,326
190756	ST. JOHN'S HOSPITAL & HEALTH CENTER	90404	930000158	Single Facility		13,743
560508	ST. JOHN'S PLEASANT VALLEY HOSPITAL	93010	50000048	Single Facility		4,876
560529	ST. JOHN'S REGIONAL MEDICAL CENTER	93030	50000064	Single Facility		13,761
301340	ST. JOSEPH HOSPITAL - ORANGE	92868	60000172	Single Facility		26,328
121080	ST. JOSEPH HOSPITAL & THE GENERAL HOSPITAL	95501	110000075	Consolidated	2	7,181
392232	ST. JOSEPH'S BEHAVIORAL HEALTH CENTER	95204	30000367	Single Facility		1,449
391042	ST. JOSEPH'S MEDICAL CENTER OF STOCKTON	95204	30000284	Single Facility		18,774
301342	ST. JUDE MEDICAL CENTER	92635	60000173	Single Facility		17,431
434138	ST. LOUISE REGIONAL HOSPITAL - GILROY	95020	70000266	Single Facility		4,619
380964	ST. LUKE'S HOSPITAL	94110	220000070	Single Facility		7,428
190053	ST. MARY MEDICAL CENTER	90813	930000012	Single Facility		14,270
361343	ST. MARY REGIONAL MEDICAL CENTER	92307	240000207	Single Facility		13,447
380965	ST. MARY'S MEDICAL CENTER, SAN FRANCISCO	94117	220000071	Single Facility		7,463
010967	ST. ROSE HOSPITAL	94545	140000107	Single Facility		8,373
190762	ST. VINCENT MEDICAL CENTER	90057	930000161	Single Facility		10,405
430905	STANFORD HOSPITAL	94305	70000090	Single Facility		19,893
501016	STANISLAUS BEHAVIORAL HEALTH CENTER	95355	30000026	Satellite Facility		3,864
504038	STANISLAUS SURGICAL HOSPITAL	95355	30000695	Single Facility		1,230
194967	STAR VIEW ADOLESCENT - P H F	90505	MH2016029	Single Facility		128
190599	SUBURBAN MEDICAL CENTER	90723	930000121	Single Facility		8,860
364121	SUN HEALTH ROBERT H. BALLARD REHAB HOSP	92411	240000502	Single Facility		800
250955	SURPRISE VALLEY COMMUNITY HOSPITAL	96104	230000025	Single Facility		61
034002	SUTTER AMADOR HOSPITAL - MISSION BLVD	95642	30000008	Single Facility		2,884
310791	SUTTER AUBURN FAITH HOSPITAL	95603	30000012	Single Facility		5,248
344017	SUTTER CENTER FOR PSYCHIATRY	95826	30000347	Single Facility		2,385
084001	SUTTER COAST HOSPITAL	95531	110000067	Single Facility		3,366
574010	SUTTER DAVIS HOSPITAL - SUTTER PL	95616	30000124	Single Facility		4,228
070934	SUTTER DELTA MEDICAL CENTER	94509	140000258	Single Facility		7,272
341051	SUTTER GENERAL HOSPITAL	95816	30000102	Parent Facility		12,517
171395	SUTTER LAKESIDE HOSPITAL	95453	110000094	Single Facility		2,891
444012	SUTTER MATERNITY & SURGERY CENTER OF SANTA CRUZ	95065	70000399	Single Facility		2,749
490919	SUTTER MEDICAL CENTER OF SANTA ROSA	95404	110000005	Single Facility		9,571
341052	SUTTER MEMORIAL HOSPITAL	95819	30000102	Satellite Facility		22,581
311000	SUTTER ROSEVILLE MEDICAL CENTER	95661	30000083	Single Facility		15,971
481094	SUTTER SOLANO MEDICAL CENTER	94590	110000082	Single Facility		6,435
391056	SUTTER TRACY COMMUNITY HOSPITAL	95376	30000105	Single Facility		4,615
491103	SUTTER WARRACK HOSPITAL	95405	110000085	Single Facility		1,062
514001	SUTTER-YUBA PSYCHIATRIC HEALTH FACILITY	95991	MH1018015	Single Facility		368
291053	TAHOE FOREST HOSPITAL	96160	230000151	Single Facility		2,494
190782	TARZANA TREATMENT CENTER	91356	930000163	Single Facility		2,519
150808	TEHACHAPI HOSPITAL	93561	120000188	Single Facility		109
314029	TELECARE PLACER COUNTY PSYCHIATRIC HLTH FAC	95678	MH2016033	Single Facility		434
484028	TELECARE SOLANO PSYCHIATRIC HEALTH FACILITY	94533	MH2016026	Single Facility		460
190784	TEMPLE COMMUNITY HOSPITAL	90004	930000164	Single Facility		3,655
010782	THUNDER ROAD CHEMICAL DEPENDENCY RECOVERY HOS	94609	140000272	Single Facility		296
191225	TOM REDGATE MEMORIAL RECOVERY CENTER	90813	930000272	Single Facility		968
190422	TORRANCE MEMORIAL MEDICAL CENTER	90505	930000076	Single Facility		26,427
370780	TRI-CITY MEDICAL CENTER	92056	80000099	Single Facility		19,652
190159	TRI-CITY REGIONAL MEDICAL CENTER	90716	930000030	Single Facility		2,772
531059	TRINITY HOSPITAL	96093	230000038	Single Facility		413
540816	TULARE DISTRICT HOSPITAL	93274	40000157	Single Facility		6,233
551061	TUOLUMNE GENERAL HOSPITAL	95370	30000107	Single Facility		1,766

APPENDIX F
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See footnotes on last page.

OSHPD ID Number	Facility Name	Zip Code	DHS/DMH* License Number	Level of Data Aggregation**	Number of Consolidated Locations***	Total Discharges
301357	TUSTIN HOSPITAL MEDICAL CENTER	92680	60000178	Single Facility		2,080
400548	TWIN CITIES COMMUNITY HOSPITAL	93465	50000078	Single Facility		5,674
190796	UCLA MEDICAL CENTER	90095	930000165	Single Facility		28,566
190930	UCLA NEUROPSYCHIATRIC HOSPITAL	90024	930000204	Single Facility		2,528
374141	UCSD/LA JOLLA - THORNTON HOSPITAL	92037	90000101	Satellite Facility		4,784
381154	UCSF MEDICAL CENTERS	94122	220000091	Consolidated	2	26,200
231396	UKIAH VALLEY MEDICAL CENTERS	95482	110000095	Consolidated	2	4,987
370787	UNIVERSITY COMMUNITY MEDICAL CENTER	92105	90000105	Single Facility		4,073
100822	UNIVERSITY MEDICAL CENTER-FRESNO	93702	40000096	Satellite Facility		10,793
341006	UNIVERSITY OF CALIFORNIA DAVIS MEDICAL CENTER	95817	30000086	Single Facility		27,804
301279	UNIVERSITY OF CALIFORNIA IRVINE MEDICAL CENTER	92668	60000148	Single Facility		18,698
370782	UNIVERSITY OF CALIF-SAN DIEGO MEDICAL CENTER	92103	90000101	Parent Facility		18,447
191216	USC KENNETH NORRIS, JR. CANCER HOSPITAL	90033	930000267	Single Facility		2,779
194219	USC UNIVERSITY HOSPITALS	90033	930000459	Consolidated	2	8,663
010983	VALLEY MEMORIAL HOSPITALS	94550	20000114	Consolidated	2	8,845
332172	VALLEY PLAZA DOCTORS HOSPITAL	92571	250000234	Single Facility		738
190812	VALLEY PRESBYTERIAN HOSPITAL	91405	930000170	Single Facility		15,076
560481	VENTURA COUNTY MEDICAL CENTER	93003	50000032	Single Facility		11,653
190818	VERDUGO HILLS HOSPITAL	91208	930000173	Single Facility		6,655
361370	VICTOR VALLEY COMMUNITY HOSPITAL	92392	240000218	Single Facility		8,406
010987	WASHINGTON HOSPITAL - FREMONT	94538	140000116	Single Facility		17,646
444013	WATSONVILLE COMMUNITY HOSPITAL - NIELSON ST	95076	70000097	Single Facility		7,484
301379	WEST ANAHEIM MEDICAL CENTER	92804	60000182	Single Facility		8,935
190859	WEST HILLS HOSPITAL & MEDICAL CENTER	91307	930000189	Single Facility		9,805
301566	WESTERN MEDICAL CENTER - SANTA ANA	92705	60000188	Single Facility		17,363
301188	WESTERN MEDICAL CENTER HOSPITAL - ANAHEIM	92805	60000117	Single Facility		10,822
190878	WHITE MEMORIAL MEDICAL CENTER	90033	930000195	Single Facility		20,224
190883	WHITTIER HOSPITAL MEDICAL CENTER	90605	930000402	Single Facility		11,044
571086	WOODLAND MEMORIAL HOSPITAL	95695	30000115	Single Facility		4,684

* Most health facilities in California are licensed by the California Department of Health Services (DHS). Also included in the OSHPD hospital database are Psychiatric Health Facilities (PHFs), licensed by the California Department of Mental Health.

** "Consolidated" means the reported set of discharges is an aggregation from more than one location (the number of included locations is displayed in the next column). "Single Facility," "Parent Facility," and "Satellite Facility" means that each set of discharges is location-specific (like all "Single Facilities," the listed Consolidated "Parents" and "Satellites" also reported their sets of discharges by specific location).

*** Since the mid-1980s, a licensed hospital can have an unlimited number of formerly free-standing licensed facilities included on one license. This allows sets of free-standing, licensed hospitals (and some nursing homes) to be merged onto a single hospital license, and is known as Consolidated Licensure. To qualify for Consolidated Licensure, the facilities must meet certain conditions, including being under common ownership, having common medical staff and being within 15 miles of each other. Consolidated hospitals can choose to report their discharges separately (by location), or in one set as a consolidated entity. Also, they can choose to un-consolidate separately licensed at any time.

To determine which formerly licensed facilities are included in these "Consolidated" sets of discharges, go to the the OSHPD **ALIRTS** system on the internet. The url is www.alirts.oshpd.ca.gov. Enter the DHS/DMH license number (or facility name, OSHPD ID #) in the search dialogue box and click "search." At the next screen, click on the "View License" text link in the far right column. The addresses, beds, and services for each location are will be displayed.

**PATIENT DISCHARGE DATA PROGRAM
SUPPLEMENTAL REPORTING PAGE**
For use with discharges on 1/1/99 and after

12. PRINCIPAL PROCEDURE

DATE

Month		Day		Year (4 - Digit)			

13. OTHER PROCEDURES

Month
Day
Year (4 - Digit)

APPENDIX H

Public 2003 Patient Discharge Data on CD-ROM Comma Delimited Fields

Field Label	Field Name	Recommended/ Required (in- bold) Field Format	Maximum Characters
OSHPD_ID	Hospital Identification Number (2 digit county, 4 digit unique)	Text	6
TYP_CARE	Type of Care (formerly Level of Care)	Text	1
AGE_YRS	Age in Years	Numeric	3
AGECAT20	Age Categories 20	Text	2
AGECAT5	Age Categories 5	Text	1
SEX	Sex	Text	1
ETHNCTY	Ethnicity	Text	1
RACE	Race	Text	1
PATZIP	Patient Zip Code	Text	5
PATCNTY	County of Patient's Residence	Text	2
LOS	Length of Stay	Numeric	5
ADM_QTR	Admission Quarter	Text	1
ADM_YR	Admission Year	Text	4
ADM_SRC	Source of Admission	Text	3
ADM_TYPE	Type of Admission	Text	1
DISP	Disposition of Patient	Text	2
DNR	Prehospital Care and Resuscitation (DNR)	Text	1
PAY_CAT	Expected Payer Source - Category	Text	2
PAY_TYPE	Expected Payer Source - Type of Coverage	Text	1
PAY_PLAN	Expected Payer Source - Payment Plan Code Number	Text	4
CHARGE	Total Charges	Numeric	7
ECODE_P	Principal E-Code - External Cause of Injury	Text	5
ECODE1	Other E-Code #1 - External Cause of Injury	Text	5
ECODE2	Other E-Code #2 - External Cause of Injury	Text	5
ECODE3	Other E-Code #3 - External Cause of Injury	Text	5
ECODE4	Other E-Code #4 - External Cause of Injury	Text	5
MDC	MDC (HCFA Major Diagnostic Category)	Text	2
DRG	DRG (HACFA Diagnosis Related Group)	Text	3
DIAG_P	Principal Diagnosis	Text	5
CPOA_P	Condition Present at Admission for Principal Diagnosis	Text	1
PROC_P	Principal Procedure	Text	4
PROC_PDY	Days From Admission to Principal Procedure	Numeric	4
ODIAG1 TO ODIAG 24	Other Diagnosis #1 through #24	Text	5
CPOA1 TO CPOA24	Condition Present at Admission for Other Diagnosis #1 through #24	Text	1
OPROC1 TO OPROC20	Other Procedure #1 through #20	Text	4
PROCDY1 TO PROCDY20	Days From Admission to Other Procedure #1 through #20	Numeric	4

APPENDIX I
Masked Field Frequencies - 2003

Data Element Value	Full file	Public file	# Masked by code	% Masked
Sex				
* (Masked)	0	719,978		
1 - Male	1,628,781	1,285,931	342,850	21.0
2 - Female	2,350,603	1,973,674	376,929	16.0
3 - Other	54	6	48	88.9
4 - Unknown	187	36	151	80.7
0 - Invalid			0	-
Total	3,979,625	3,979,625	719,978	18.1
Ethnicity				
* (Masked)	0	1,185,836		
1 - Hispanic	1,111,558	788,896	322,662	29.0
2 - Non-Hispanic	2,804,161	1,988,493	815,668	29.1
3 - Unknown	63,906	16,400	47,506	74.3
0 - Invalid	0	0	0	-
Total	3,979,625	3,979,625	1,185,836	29.8
Race				
* (Masked)	0	1,030,926		
1 - White	2,834,920	2,241,347	593,573	20.9
2 - Black	330,600	202,749	127,851	38.7
3 - Native Am	17,370	5,184	12,186	70.2
4 - Asian	299,370	179,498	119,872	40.0
5 - Other	451,881	307,386	144,495	32.0
6 - Unknown	45,484	12,535	32,949	72.4
0 - Invalid	0	0	0	-
Total	3,979,625	3,979,625	1,030,926	25.9
Patient County				
* (Masked)	0	291		
CE	4,750	4,619	131	2.8
NE	3,446	3,363	83	2.4
NW	7,006	6,929	77	1.1
All others	3,964,423	3,964,423	0	0.0
Total	3,979,625	3,979,625	291	0.0
Admit Quarter				
* (Masked)	0	135,758		
1	999,129	967,424	31,705	3.2
2	984,417	952,451	31,966	3.2
3	1,006,928	973,744	33,184	3.3
4	989,150	950,248	38,902	3.9
Invalid	1	0	1	100.0
Total	3,979,625	3,979,625	135,757	3.4
Agecat5				
* (Masked)	0	267,832		
1	607,928	579,064	28,864	4.7
2	215,663	187,064	28,599	13.3
3	745,197	689,184	56,013	7.5
4	1,203,443	1,113,005	90,438	7.5
5	1,207,394	1,143,476	63,918	5.3
Total	3,979,625	3,979,625	267,832	6.7

Data Element Value	Full file	Public file	# Masked by code	% Masked
Age in Years at Admisssion				
Blank (Masked)	0	1,827,586		
0	607,928	499,472	108,456	17.8
1	24,514	9,950	14,564	59.4
2	14,987	4,871	10,116	67.5
3	11,425	3,369	8,056	70.5
4	9,978	2,859	7,119	71.3
5	9,072	2,339	6,733	74.2
6	8,373	2,011	6,362	76.0
7	8,167	1,961	6,206	76.0
8	7,865	1,952	5,913	75.2
9	7,996	1,887	6,109	76.4
10	8,312	1,945	6,367	76.6
11	8,516	1,947	6,569	77.1
12	9,550	2,347	7,203	75.4
13	11,323	3,037	8,286	73.2
14	13,573	3,493	10,080	74.3
15	16,295	4,242	12,053	74.0
16	20,622	6,328	14,294	69.3
17	25,095	8,895	16,200	64.6
18	29,742	12,606	17,136	57.6
19	35,302	16,607	18,695	53.0
20	38,847	18,763	20,084	51.7
21	40,990	20,018	20,972	51.2
22	42,401	20,905	21,496	50.7
23	42,872	21,028	21,844	51.0
24	43,098	20,816	22,282	51.7
25	43,840	21,343	22,497	51.3
26	45,484	22,054	23,430	51.5
27	45,152	21,440	23,712	52.5
28	46,304	21,663	24,641	53.2
29	46,612	22,099	24,513	52.6
30	48,162	22,688	25,474	52.9
31	48,550	22,531	26,019	53.6
32	50,430	23,229	27,201	53.9
33	49,584	22,339	27,245	54.9
34	47,827	21,100	26,727	55.9
35	44,371	18,907	25,464	57.4
36	42,649	17,365	25,284	59.3
37	41,084	16,347	24,737	60.2
38	41,015	15,702	25,313	61.7
39	41,309	15,921	25,388	61.5
40	40,514	15,274	25,240	62.3
41	39,734	15,022	24,712	62.2
42	39,614	15,113	24,501	61.8
43	38,846	14,615	24,231	62.4
44	39,685	15,207	24,478	61.7
45	39,578	15,722	23,856	60.3
46	40,465	16,029	24,436	60.4
47	40,659	15,947	24,712	60.8
48	40,782	16,176	24,606	60.3
49	41,110	16,596	24,514	59.6
50	41,315	16,857	24,458	59.2
51	40,473	16,406	24,067	59.5
52	40,233	16,371	23,862	59.3
53	40,264	16,441	23,823	59.2
54	40,470	16,758	23,712	58.6
55	41,810	17,750	24,060	57.5
56	43,129	18,821	24,308	56.4
57	37,257	15,443	21,814	58.6
58	37,062	15,491	21,571	58.2
59	39,216	16,978	22,238	56.7
60	40,659	17,870	22,789	56.0
61	38,100	16,483	21,617	56.7
62	37,178	16,302	20,876	56.2

APPENDIX I
Masked Field Frequencies - 2003

Data Element Value	Full file	Public file	# Masked by code	% Masked
Agecat20				
* (Masked)	0	527,491		
01	607,928	579,064	28,864	4.7
02	60,904	49,394	11,510	18.9
03	41,473	30,465	11,008	26.5
04	51,274	36,425	14,849	29.0
05	127,056	94,059	32,997	26.0
06	208,208	180,583	27,625	13.3
07	227,392	198,338	29,054	12.8
08	244,553	212,225	32,328	13.2
09	210,428	176,560	33,868	16.1
10	198,393	162,262	36,131	18.2
11	202,594	165,986	36,608	18.1
12	202,755	166,773	35,982	17.7
13	198,474	164,117	34,357	17.3
14	190,799	159,392	31,407	16.5
15	206,022	176,293	29,729	14.4
16	232,136	203,841	28,295	12.2
17	261,698	234,150	27,548	10.5
18	245,216	221,435	23,781	9.7
19	262,322	240,772	21,550	8.2
Total	3,979,625	3,979,625	527,491	13.3

Data Element Value	Full file	Public file	# Masked by code	% Masked
63	37,637	16,635	21,002	55.8
64	37,225	16,421	20,804	55.9
65	40,595	19,006	21,589	53.2
66	40,302	19,170	21,132	52.4
67	41,323	19,949	21,374	51.7
68	42,218	20,858	21,360	50.6
69	41,584	20,636	20,948	50.4
70	43,004	21,843	21,161	49.2
71	44,434	23,320	21,114	47.5
72	46,497	24,812	21,685	46.6
73	49,406	27,439	21,967	44.5
74	48,795	27,192	21,603	44.3
75	50,009	28,472	21,537	43.1
76	51,146	29,526	21,620	42.3
77	52,452	30,949	21,503	41.0
78	54,239	33,139	21,100	38.9
79	53,852	32,801	21,051	39.1
80	52,930	32,732	20,198	38.2
81	52,933	33,175	19,758	37.3
82	51,222	32,200	19,022	37.1
83	46,629	29,029	17,600	37.7
84	41,502	25,680	15,822	38.1
85+	262,322	215,007	47,315	18.0
Total	3,979,625	3,979,625	1,827,586	45.9